

THE
NATIONAL
INSTITUTE
FOR
RESEARCH
IN
DAIRYING



Hampshire County Council

REPORT

of the

County Medical Officer

H. LESLIE CRONK, M.A., M.D., D.P.H.,

for the year

1935

(Including the Forty-Sixth Annual Health Returns and Statistics).

Southend-on-Sea :

W. H. HOULDERSHAW, LIMITED, PRINTERS, 49, LONDON ROAD.



Hampshire County Council.

*With the
County Medical Officers
Compliments.*

*The Castle,
Winchester.*



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Area and Population.

The area of the Administrative County is 931,803 acres, and the population as estimated by the Registrar General at the middle of 1935, 496,300.

	Area in acres	Population Mid. 1935	Persons per acre
Urban Districts	97,199	278,700	2.87
Rural Districts	834,604	217,600	0.26
Administrative County	931,803	496,300	0.53

Vital Statistics.

Extract from Vital Statistics.

Rateable value for whole County £3,393,371
Estimated product of Rate of one penny (1935-1936) £13,167

				Total	M.	F.	
Live Births	{	Legitimate	...	7,105	3,639	3,466	} Rate per 1,000 of the Population 15.0 Rate per 1,000 total (Live and Still) Births 34.0
		Illegitimate	...	315	157	158	
Stillbirths	...	...	...	263	139	124	
Deaths	...	...	...	5,230	2,682	2,548	Rate per 1,000 of the Population 10.5
Number					Rate per 1,000 total (Live and Still) Births		
Deaths from :—							
Puerperal Sepsis				...	...	13	1.7
Other Puerperal causes				...	26		3.4
Total				...	...	39	5.1

						Number	Rate
Death Rate of Infants under One Year of Age :—							
All Infants per 1,000 live births						294	40.0
Legitimate Infants per 1,000 legitimate live births						277	37.2
Illegitimate Infants per 1,000 illegitimate live births						17	54.0

Deaths from : Measles (all ages), 6 ; Whooping Cough (all ages), 6 ; and Diarrhoea (under 2 years of age), 15.

Birth Rate.

The following table shows the number of live births occurring in the County during the year under review, and for the previous ten years, as distributed between urban and rural districts: the birth rate for England and Wales is also given for comparison.

Births Occurring in the County since 1925.

Year	Urban Districts		Rural Districts		Administrative County		Rate in England and Wales
	Number	Rate	Number	Rate	Number	Rate	
1925	3616	18.4	4118	17.2	7734	17.8	18.3
1926	3486	17.9	4089	16.8	7575	17.3	17.8
1927	3431	17.1	4052	16.6	7483	16.9	16.6
1928	3592	17.6	4226	16.8	7818	17.1	16.7
1929	3490	16.7	4131	16.2	7621	16.5	16.3
1930	3566	16.9	4081	16.2	7647	16.5	16.3
1931	3673	17.3	3989	15.6	7662	16.3	15.8
1932	4158	16.5	3441	15.3	7599	15.9	15.3
1933	4076	15.2	3125	14.6	7201	14.9	14.4
1934	4103	14.9	3240	15.0	7343	15.0	14.8
Average 1925-1934	3719	16.8	3849	16.0	7568	16.4	16.2
1935	4228	15.2	3192	14.7	7420	15.0	14.7

The total number of births (live and still) registered in the Administrative County during 1935 was 7,683, distributed as shown in the following table.

	Male	Female	Total
Urban Districts	2230	2146	4376
Rural Districts	1705	1602	3307
Administrative County ...	3935	3748	7683

During 1935 263 stillbirths were registered, which gives a rate of 34 per thousand total births.

Among illegitimate births the stillbirth rate was 43 per thousand (14 stillbirths and 315 live), while 34 per thousand among legitimate (249 stillbirths and 7105 live).

Legitimate births (still and live) numbered 7,354 and illegitimate 329, giving a rate of 4.5 illegitimate per 100 legitimate.

Year	Stillbirth rate		Rate of illegitimate births per 100 legitimate
	Illegitimate	Legitimate	
1930	24	32	5.0
1931	58	36	5.0
1932	44	34	4.8
1933	37	32	5.0
1934	43	33	5.5
1935	43	34	4.5

Death Rate.

The following table shows the distribution of deaths occurring in the Administrative County between urban and rural districts and compares the death rate of the County with the death rate for England and Wales.

Deaths Occurring in the County since 1925.

Year	Urban Districts		Rural Districts		Administrative County		Rate in England and Wales
	Number	Rate	Number	Rate	Number	Rate	
1925	1933	10.9	2576	11.2	4509	11.1	12.2
1926	1905	10.8	2589	11.1	4494	10.9	11.6
1927	2159	11.9	2805	12.0	4964	11.9	12.3
1928	2076	11.2	2503	10.3	4579	10.7	11.7
1929	2398	12.7	3090	12.6	5488	12.7	13.4
1930	2091	11.0	2781	11.4	4872	11.3	11.4
1931	2271	11.8	2796	11.3	5067	11.5	12.3
1932	2735	10.8	2549	11.4	5284	11.1	12.0
1933	3033	11.3	2380	11.1	5413	11.2	12.3
1934	2797	10.2	2287	10.6	5084	10.4	11.8
Average 1925-1934	2340	11.3	2635	11.3	4975	11.3	12.1
1935	2948	10.6	2282	10.5	5230	10.5	11.7

With regard to sex, the total number of deaths registered during the year 1935 was distributed as follows :—

	Male	Female	Total
Urban Districts	1513	1435	2948
Rural Districts	1169	1113	2282
Administrative County	2682	2548	5230

The natural increase in the population of the County during 1935, being excess of births over deaths, was 2,190, as compared with 2,259 in 1934, 1,788 in 1933, and 2,315 in 1932.

BIRTHS AND DEATHS, 1935.

URBAN DISTRICTS.

ADMINISTRATIVE AREA	POPULATION		BIRTHS (EXCLUSIVE OF STILL-BORN)								DEATHS (EXCLUSIVE OF STILL-BORN)		DEATHS UNDER ONE YEAR	
	Estimated Mid 1935	Census 1931	Legitimate		Illegitimate		Total	Rate per 1000 Population	Total	Rate per 1000 Population	Number	Rate per 1000 Births	Number	Rate per 1000 Births
			M.	F.	M.	F.								
ALDERSHOT	35730	34280	313	322	13	11	659	18.4	274	7.7	20	30		
ALTON	7397	7225	60	46	1	3	110	14.9	111	15.0	4	36		
ANDOVER	11490	10076	104	99	4	4	211	18.4	121	10.5	5	24		
BASINGSTOKE	14260	14217	102	94	4	5	205	14.4	155	10.9	4	20		
CHRISTCHURCH	12820	11444	80	101	6	5	192	15.0	147	11.5	8	42		
EASTLEIGH	24510	23434	173	169	5	2	349	14.2	237	9.7	16	46		
FAREHAM	24560	21817	204	187	9	6	406	16.5	286	11.6	12	30		
FARNBOROUGH	21100	19532	149	167	9	1	326	15.4	161	7.6	14	43		
FLEET	7951	7810	50	63	2	2	117	14.7	72	9.1	5	43		
GOSPORT	41910	38443	343	328	19	15	705	16.8	414	9.9	35	50		
HAVANT AND WATERLOO	23860	20991	133	138	9	5	285	11.9	274	11.5	12	42		
LYMINGTON	16880	15430	103	86	5	8	202	12.0	214	12.7	13	64		
PETERSFIELD	5836	5424	49	31	1	—	81	13.9	78	13.4	1	12		
ROMSEY	5736	5778	36	40	3	6	85	14.8	76	13.2	4	47		
WINCHESTER	24660	23523	153	128	8	6	295	12.0	328	13.3	11	37		
TOTAL—Urban Districts	278700	259424	2052	1999	98	79	4228	15.2	2948	10.6	164	39		
TOTAL—Rural Districts	217600	209661	1587	1467	59	79	3192	14.7	2282	10.5	130	41		
TOTAL—COUNTY ...	496300	469085	3639	3466	157	158	7420	15.0	5230	10.5	294	40		

VITAL STATISTICS
RURAL DISTRICTS.

ADMINISTRATIVE AREA	POPULATION		BIRTHS (EXCLUSIVE OF STILL-BORN)						DEATHS (EXCLUSIVE OF STILL-BORN)		DEATHS UNDER ONE YEAR	
	Estimated Mid 1935	Census 1931	Legitimate		Illegitimate		Total	Rate per 1000 Population	Total	Rate per 1000 Population	Number	Rate per 1000 Births
			M.	F.	M.	F.						
ALTON	21200	20455	169	173	6	8	356	16.8	217	10.2	14	39
ANDOVER	14220	13916	113	110	3	3	229	16.1	131	9.2	11	48
BASINGSTOKE	14320	14469	85	88	—	6	179	12.5	139	9.7	8	45
DROXFORD	18060	17861	120	106	5	4	235	13.0	198	11.0	8	34
HARTLEY WINTNEY ...	16180	16430	102	110	3	10	225	13.9	174	10.8	3	13
KINGSCLERE AND WHITCHURCH	15130	14910	94	89	4	6	193	12.8	161	10.6	9	47
NEW FOREST	34110	31074	279	229	16	14	538	15.8	309	9.1	23	43
PETERSFIELD	15470	14417	127	99	4	6	236	15.3	159	10.3	9	38
RINGWOOD AND FORDINGBRIDGE	18500	18217	115	111	7	11	244	13.2	225	12.2	8	33
ROMSEY AND STOCKBRIDGE	18330	17179	147	117	5	4	273	14.9	218	11.9	11	40
WINCHESTER	32080	30733	236	235	6	7	484	15.1	351	10.9	26	54
TOTAL—Rural Districts	217600	209661	1587	1467	59	79	3192	14.7	2282	10.5	130	41

GENERAL MORTALITY RETURNS, 1935.

URBAN DISTRICTS.

DISTRICT	Area in Acres	POPULATION		Typhoid and Paratyphoid Fevers	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Encephalitis Lethargica	Cerebro-Spinal Fever	Tuber. of Res. piratory Systm.	Other Tubercu- lous Diseases	Syphilis	General Paralysis of the Insane Tabes Dorsalis	Cancer (Malig- nant Disease)	Diabetes	Cerebral Ha- morrhage, etc.	Heart Disease	Aneurysm	Other Circula- tory Diseases	Bronchitis	Pneumonia (all forms)	Other Respira- tory Diseases	Peptic Ulcer	Diarrhoea, etc. (under 2 years)	Appendicitis	Cirrhosis of Liver	Other Diseases of Liver, etc.	Other Digest- ive Diseases	Acute & Chronic Nephritis	Puerperal Sepsis	Other Puer- peral Causes	Congl. Debility, Premat. Birth, Malformations, etc	Senility	Suicide	Other Violence	Other Defined Diseases	Causes ill-defined or unknown
		Estimated Population Mid. 1935	Census 1931																																				
ALDERSHOT ...	4176	35730	34280	—	2	—	—	6	5	—	1	15	2	1	1	34	10	12	51	1	12	3	22	3	1	—	4	1	3	8	13	1	2	13	10	9	12	16	—
ALTON ...	4160	7397	7225	—	—	—	—	1	1	—	1	4	11	—	—	13	2	5	26	1	4	3	3	1	1	—	2	—	—	4	3	—	—	1	13	1	1	9	—
ANDOVER ...	6381	11490	10076	—	—	—	—	1	1	—	—	6	—	—	—	16	1	4	30	—	8	3	3	—	1	—	—	1	—	9	5	—	—	3	13	3	4	9	—
BASINGSTOKE ...	5180	14260	14217	—	—	—	1	1	1	—	1	6	1	—	—	24	—	9	47	—	4	4	9	4	1	—	1	—	1	2	9	—	—	4	7	3	1	14	—
CHRISTCHURCH ...	4813	12820	11444	—	—	2	—	—	2	—	—	8	2	—	1	17	2	20	45	1	8	3	7	1	2	1	1	—	—	6	3	1	—	4	—	3	1	6	—
EASTLEIGH ...	6269	24510	23434	—	—	—	—	2	—	—	—	7	—	—	—	39	5	18	73	2	7	8	7	3	2	2	1	2	2	5	6	2	1	8	9	1	8	17	—
FAREHAM ...	18352	24560	21817	—	—	—	—	2	3	1	—	13	4	—	2	39	5	27	58	2	5	12	14	8	2	—	1	—	—	7	7	2	2	11	25	4	10	20	—
FARNBOROUGH ...	4322	21100	19532	—	—	—	—	2	—	—	1	7	8	1	—	18	6	1	43	—	7	2	8	—	2	—	1	1	1	4	12	—	1	12	—	5	3	15	—
FLEET ...	3694	7951	7810	—	—	—	—	—	—	—	1	4	—	—	1	8	—	3	26	—	6	—	3	—	3	—	1	—	—	—	1	—	—	1	—	—	4	10	—
GOSPORT ...	6177	41910	38443	—	—	2	3	3	2	—	1	15	3	—	2	34	10	35	69	3	20	14	20	3	5	1	1	1	—	7	22	3	1	23	39	6	22	44	—
HAVANT AND WATERLOO	12074	23860	20991	—	—	—	1	1	8	—	—	17	—	1	—	37	3	15	74	1	12	3	7	1	3	—	—	1	5	7	14	—	2	7	17	2	7	28	—
LYMINGTON ...	13730	16880	15430	—	1	—	—	—	—	—	—	9	—	3	2	34	—	11	51	—	19	1	6	2	—	—	2	—	—	4	10	—	—	10	27	1	5	15	1
PETERSFIELD ...	2771	5836	5424	—	—	—	—	—	—	—	—	1	1	1	—	16	1	6	21	—	9	1	2	—	—	—	2	—	1	1	3	—	—	1	—	3	1	7	—
ROMSEY ...	1212	5736	5778	—	—	—	1	—	—	—	—	1	—	—	—	8	—	—	24	—	7	1	3	—	—	1	1	—	—	3	—	—	—	2	11	1	3	8	1
WINCHESTER ...	3888	24660	23523	—	—	—	—	1	4	1	—	15	3	—	—	31	5	19	84	—	15	7	13	3	1	—	1	4	2	15	9	—	—	7	37	4	10	35	2
TOTAL—Urban ...	97199	278700	259424	—	3	4	6	20	27	2	6	128	35	7	9	368	50	185	722	11	143	65	127	29	24	5	19	11	15	82	117	9	9	107	208	46	92	253	4
TOTAL—Rural ...	834604	217600	209661	2	3	2	—	7	24	5	1	76	14	2	9	329	27	117	592	2	152	66	89	23	16	10	13	10	13	62	83	4	17	81	102	25	91	210	3
ADMINISTRATIVE COUNTY	931803	496300	469085	2	6	6	6	27	51	7	7	204	49	9	18	697	77	302	1314	13	295	131	216	52	40	15	32	21	28	144	200	13	26	188	310	71	183	463	7

RURAL DISTRICTS.

DISTRICT	Area in Acres	POPULATION		Typhoid and Paratyphoid Fevers	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Encephalitis Lethargica	Cerebro-Spinal Fever	Tuber. of Res. piratory Systm.	Other Tubercu- lous Diseases	Syphilis	General Paralysis of the Insane	Tuberc. Dorsalis	Cancer (Malign- ant Disease)	Diabetes	Cerebral Ha- morrhage, etc.	Heart Disease	Aneurysm	Other Circula- tory Diseases	Bronchitis	Pneumonia (all forms)	Other Respira- tory Diseases	Peptic Ulcer	Diarrhoea, etc. (under 2 years)	Appendicitis	Cirrhosis of Liver	Other Diseases of Liver, etc.	Other Digest- ive Diseases	Acute & Chronic Nephritis	Puerperal Sepsis	Puer- peral Causes	Congl. Debility, Premat. Birth, Malformations, etc.	Senility	Suicide	Other Violence	Other Defined Diseases	Causes ill-defined or unknown
		Estimated Population Mid. 1935	Census 1931																																					
ALTON	65529	21209	20455	1	1	—	—	2	2	1	—	5	1	—	—	23	5	16	48	—	13	7	8	2	2	1	1	1	1	1	4	8	1	4	9	21	6	10	13	—
ANDOVER	67808	14220	13916	—	—	—	—	—	2	1	—	7	—	—	—	15	1	8	33	—	4	6	5	—	3	2	2	—	1	6	3	—	1	6	11	1	3	10	—	
BASINGSTOKE ...	74790	14320	14469	—	—	1	—	—	3	—	1	4	1	—	—	20	3	8	39	—	2	8	3	1	2	1	—	1	1	1	2	—	3	4	5	1	6	18	—	
DRONFORD	62773	18060	17861	1	—	1	—	—	4	—	—	8	1	—	2	31	1	8	59	—	15	3	10	2	2	—	1	2	2	5	5	1	—	4	2	—	7	19	2	
HARTLEY WINTNEY	50715	16180	16439	—	—	—	—	—	1	—	—	4	3	—	—	31	3	4	68	—	16	1	4	—	—	—	—	1	1	2	4	—	—	2	3	2	6	18	—	
KINGSCLERE AND WHITCHURCH	77394	15130	14910	—	—	—	—	—	3	2	—	2	2	1	—	25	1	9	53	—	11	1	11	3	1	—	1	—	—	2	5	—	—	7	2	1	6	12	—	
NEW FOREST	94954	34110	31074	—	—	—	—	2	4	—	—	10	—	—	4	44	4	12	67	—	17	9	12	5	2	3	3	3	1	12	17	—	4	14	13	3	12	32	—	
PETERSFIELD	56388	15470	14417	—	—	—	—	—	1	—	—	7	1	—	1	29	5	6	41	1	10	6	6	1	1	1	—	—	3	5	4	—	1	6	3	2	8	10	—	
RINGWOOD AND FORDINORRIDGE	90143	18500	18217	—	—	—	—	1	2	—	—	9	1	1	1	26	3	18	59	—	14	5	9	3	—	—	2	1	—	12	12	—	—	6	6	3	10	21	—	
ROMSEY AND STOCKBRIDGE	83674	18330	17179	—	—	—	—	—	1	—	—	6	2	—	—	37	1	7	47	—	19	10	11	3	1	1	1	1	2	3	9	2	1	5	17	1	10	19	1	
WINCHESTER	110436	32080	30733	—	2	—	—	2	1	1	—	14	2	—	1	48	—	21	78	1	31	10	10	3	2	1	2	—	1	10	14	—	3	18	19	5	13	38	—	
TOTAL—Rural	834604	217600	209661	2	3	2	—	7	24	5	1	76	14	2	9	329	27	117	592	2	152	66	89	23	16	10	13	10	13	62	83	4	17	81	102	25	91	210	3	

CAUSES OF, AND AGES AT, DEATH DURING THE YEAR, 1935.

URBAN DISTRICTS.

CAUSES OF DEATH	All Ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 35 years	35 and under 45 years	45 and under 55 years	55 and under 65 years	65 and under 75 years	75 and upwards
Typhoid and para- Typhoid Fevers ...	—	—	—	—	—	—	—	—	—	—	—	—
Measles	3	1	1	1	—	—	—	—	—	—	—	—
Scarlet Fever	4	—	—	1	2	—	—	1	—	—	—	—
Whooping-cough	6	4	—	1	1	—	—	—	—	—	—	—
Diphtheria	20	—	—	2	15	2	1	—	—	—	—	—
Influenza	27	1	—	—	—	—	3	—	3	3	8	9
Encephalitis Lethargica ...	2	—	—	—	1	—	1	—	—	—	—	—
Cerebro-Spinal Fever ...	6	1	—	1	1	2	—	—	1	—	—	—
Tuberculosis of Respira- tory System	128	—	—	—	—	21	39	33	23	8	4	—
Other Tuberculous Diseases	35	1	3	8	9	4	3	2	2	2	1	—
Syphilis	7	1	—	—	—	1	—	1	3	1	—	—
General Paralysis of the Insane, Tabes dorsalis...	9	—	—	—	1	—	—	—	2	3	3	—
Cancer, Malignant Disease	368	—	—	—	2	2	5	20	41	79	113	106
Diabetes	50	—	—	—	—	1	1	2	7	15	14	10
Cerebral Hæmorrhage, etc.	185	—	—	—	—	—	—	2	14	33	66	70
Heart Disease	722	—	—	—	4	8	8	16	50	114	207	315
Aneurysm	11	—	—	—	—	1	—	—	2	2	4	2
Other Circulatory Diseases	143	—	—	1	—	—	—	1	5	27	41	68
Bronchitis	65	2	—	—	1	—	—	2	2	3	16	39
Pneumonia (all forms) ...	127	24	6	—	3	4	7	6	19	16	21	21
Other Respiratory Diseases	29	1	1	1	3	—	1	1	5	8	2	6
Peptic Ulcer	24	—	—	—	—	—	2	4	5	5	5	3
Diarrhœa, etc.	16	4	1	1	1	1	—	—	—	4	3	1
Appendicitis	19	—	—	1	—	4	1	2	3	3	3	2
Cirrhosis of Liver	11	—	—	—	—	—	—	—	3	2	4	2
Other Diseases of Liver, etc.	15	—	—	—	—	—	—	1	2	6	4	2
Other Digestive Diseases...	71	3	—	—	5	2	5	6	4	20	7	19
Acute & Chronic Nephritis	117	—	—	2	1	4	5	4	15	21	35	30
Puerperal Sepsis	9	—	—	—	—	2	6	1	—	—	—	—
Other Puerperal Causes ...	9	—	—	—	—	3	4	2	—	—	—	—
Congenital Debility, Pre- mature Birth, Malforma- tions, etc.	107	104	1	—	—	1	—	1	—	—	—	—
Senility	208	—	—	—	—	—	—	—	—	3	37	168
Suicide	46	—	—	—	1	4	11	9	8	7	5	1
Other Violence	92	2	1	5	5	20	8	10	9	8	8	16
Other Defined Diseases ...	253	15	1	5	10	13	11	17	31	39	58	53
Causes ill-defined or un- known	4	—	—	—	—	—	—	—	1	—	1	2
All Causes	2948	164	15	30	66	100	122	144	260	432	670	945

CAUSES OF, AND AGES AT, DEATH DURING THE YEAR, 1935.

RURAL DISTRICTS.

CAUSES OF DEATH	All Ages	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 35 years	35 and under 45 years	45 and under 55 years	55 and under 65 years	65 and under 75 years	75 and upwards
Typhoid and para-Typhoid Fever	2	—	—	—	—	—	—	—	—	2	—	—
Measles	3	—	1	—	1	—	—	—	1	—	—	—
Scarlet Fever	2	—	—	—	—	—	2	—	—	—	—	—
Whooping-cough	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	7	1	—	1	5	—	—	—	—	—	—	—
Influenza	24	1	—	2	—	1	2	2	2	6	4	4
Encephalitis Lethargica ...	5	—	—	—	—	1	1	1	1	—	1	—
Cerebro-Spinal Fever ...	1	—	—	—	—	—	1	—	—	—	—	—
Tuberculosis of Respira- tory System	76	—	—	—	—	11	18	21	16	5	3	2
Other Tuberculous Diseases	14	1	1	1	2	1	—	1	4	1	1	1
Syphilis	2	—	—	—	—	—	—	—	—	1	—	1
General Paralysis of the Insane, Tabes dorsalis	9	—	—	—	—	—	—	2	1	4	2	—
Cancer, Malignant Disease	329	—	—	—	—	—	3	18	31	84	109	84
Diabetes	27	—	—	—	—	—	3	—	3	5	8	8
Cerebral Hæmorrhage, etc.	117	—	—	—	—	—	—	1	7	9	43	57
Heart Disease	592	—	—	1	1	3	4	9	30	84	178	282
Aneurysm	2	—	—	—	—	—	1	1	—	—	—	—
Other Circulatory Diseases	152	—	—	—	—	—	—	1	5	19	47	80
Bronchitis	66	4	—	—	—	—	3	1	2	4	11	41
Pneumonia (all forms) ...	89	16	5	2	—	3	5	7	4	22	6	19
Other Respiratory Diseases	23	—	1	—	1	—	1	2	2	6	5	5
Peptic Ulcer	16	—	—	—	—	1	—	2	4	6	3	—
Diarrhœa, etc.	21	8	2	1	—	1	1	3	—	3	1	1
Appendicitis	13	—	—	1	—	5	4	—	1	1	1	—
Cirrhosis of Liver	10	—	—	—	—	—	—	1	2	4	3	—
Other Diseases of Liver, etc.	13	—	—	—	—	—	—	—	3	4	5	1
Other Digestive Diseases	51	1	—	—	2	2	1	2	6	8	12	17
Acute & Chronic Nephritis	83	2	—	—	—	4	2	8	10	9	19	29
Puerperal Sepsis	4	—	—	—	—	—	2	2	—	—	—	—
Other Puerperal Causes ...	17	—	—	—	—	2	13	2	—	—	—	—
Congenital Debility, pre- mature Birth, Malforma- tions, etc.	81	80	—	—	—	—	—	1	—	—	—	—
Senility	102	—	—	—	—	—	—	—	—	3	9	90
Suicide	25	—	—	—	—	4	3	4	5	4	4	1
Other Violence	91	1	5	—	9	20	7	3	14	7	9	16
Other Defined Diseases ...	210	14	1	5	13	7	16	12	21	37	46	38
Causes ill-defined or un- known	3	1	—	—	—	—	—	—	—	—	—	2
All Causes	2282	130	16	14	34	66	93	107	175	338	530	779

Causes of death in the Administrative County
during the years 1930-1935.

Diseases	1930	1931	1932	1933	1934	1935
Typhoid and Para-typhoid Fevers ...	1	2	3	—	3	2
Measles	58	9	24	7	25	6
Scarlet Fever	9	8	1	6	11	6
Whooping Cough	23	22	21	28	16	6
Diphtheria	22	19	13	13	17	27
Influenza	39	133	158	256	49	51
Encephalitis Lethargica	8	9	8	3	5	7
Cerebro-spinal Fever	6	9	13	7	5	7
Tuberculosis of Respiratory System ...	238	242	231	239	221	204
Other Tuberculous Diseases	63	63	61	66	58	49
Cancer, Malignant Disease	701	674	665	720	680	697
Diabetes	58	45	68	67	67	77
Cerebral Hæmorrhage, etc.	280	268	258	278	281	302
Heart Disease	1074	1137	1191	1218	1250	1314
Bronchitis... ..	143	209	171	167	145	131
Pneumonia (all Forms)	223	236	319	244	274	216
Other Respiratory Diseases	59	72	71	54	49	52
Peptic Ulcer	44	44	40	49	36	40
Diarrhœa, etc.	19	33	50	41	35	37
Appendicitis	31	39	40	31	34	32
Cirrhosis of Liver	16	23	17	17	11	21
Acute and Chronic Nephritis	186	165	189	172	208	200
Puerperal Sepsis	11	8	16	11	16	13
Other Puerperal Causes	18	14	26	25	19	26
Congenital Debility, Premature Birth, Malformation, etc.	185	188	209	239	174	188
Suicide	50	58	70	43	68	71
Other Violence	198	174	200	218	211	183
Syphilis		10	11	10	4	9
General Paralysis of the Insane, } Tabes Dorsalis		16	20	18	13	18
Aneurysm		24	21	11	16	13
Other Circulatory Diseases	1107	237	261	270	250	295
Other Diseases of Liver		33	29	25	31	28
Other Digestive Diseases		129	91	105	104	122
Senility		270	259	272	229	310
Other Defined Diseases		433	444	476	461	463
Causes ill-defined or Unknown	2	12	15	7	8	7
TOTALS	4872	5067	5284	5413	5084	5230
Estimated Population	432600	440190	475900	482500	490200	496300
Death Rate per 1,000	11.3	11.5	11.1	11.2	10.4	10.5

* It is necessary to group these in this way owing to changes in nomenclature.

Last year note was made of the decrease in the number of deaths from influenza (49 as against 256); in 1935 the number was 51. There is a further increase in the deaths from heart disease, from 1,250 to 1,314. The bronchitis figure has fallen steadily during the past five years: from 209 in 1931 to 131 last year. Pneumonia accounted for only 216 deaths, as against 274 in 1934. There is a remarkable increase in the number of deaths from senility (310 as compared with 229).

The relative importance from the point of view of mortality of certain well-defined diseases or groups of diseases is shown in the following statement :—

Disease	Number of deaths in 1935	Percentage of total deaths in 1935	Percentage of total deaths in 1934	Percentage of total deaths in 1933
Heart Disease	1314	25.1	24.6	22.5
Cancer	697	13.3	13.4	13.3
Tuberculosis (all forms)	253	4.8	5.5	5.6
Pneumonia (all forms)	216	4.1	5.4	4.5
Influenza	51	1.0	1.0	4.7
Cerebral Hæmorrhage	302	5.8	5.5	5.1
Bronchitis	131	2.5	2.9	3.1
Violence (including Suicide)	254	4.9	5.5	4.8
Congenital Debility and Malformation	188	3.6	3.4	4.4
Acute and Chronic Nephritis	200	3.8	4.1	3.2
Typhoid Fever, Measles, Scarlet Fever, Whooping Cough, Diphtheria ...	47	0.9	1.4	1.0

The age distribution of deaths is shown in the following summary :—

	Under 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and under 75 years	75 and upwards
1933 ...	366	58	63	97	188	518	1266	1198	1659
Percentage of total deaths	6.8	1.1	1.2	1.8	3.5	9.5	23.4	22.1	30.6
1934 ...	289	62	66	114	184	518	1152	1225	1474
Percentage of total deaths	5.7	1.2	1.3	2.2	3.6	10.2	22.7	24.1	29.0
1935 ...	294	31	43	101	166	466	1205	1200	1724
Percentage of total deaths	5.6	0.6	0.8	1.9	3.2	8.9	23.0	23.0	33.0

If this table be compared with those previously published the downward tendency of the proportion of deaths contributed by the younger ages will be seen.

Percentage of Total Deaths.	1930.	1931.	1932.	1933.	1934.	1935.
Under 5 years	10.1	8.8	9.6	9.1	8.2	7.0
Total under 15 years	12.6	11.2	11.9	10.9	10.4	8.9

There is this year a slight decrease in the proportion of deaths contributed by those from 15 to 45 years of age.

The following review of the past three years shews the number of deaths from certain diseases and groups of related diseases at ages 15-45 together with death rates per hundred thousand total population.

It is noteworthy that there is a decrease in the rate in every one of the first six groups that is up to 45 years and an increase in each of the last three, the most striking being the final one (75 and upwards) where it rose from 29 to 33.

				1933		1934		1935	
				No. of Deaths	Rate	No. of Deaths	Rate	No. of Deaths	Rate
Influenza	...	...	...	36	7.5	...	7	1.4	...
Tuberculosis	respt.	...	...	155	32.1	...	157	32.0	...
„	other	...	...	25	5.2	...	19	3.9	...
Cancer	...	...	...	54	11.2	...	45	9.2	...
Diabetes	...	...	...	11	2.2	...	4	0.8	...
Pneumonia	...	...	...	40	8.3	...	46	9.4	...
Bronchitis, etc.	...	...	...	13	2.7	...	14	2.9	...
Appendicitis	...	...	...	14	2.9	...	12	2.4	...
Other digestive	...	...	...	25	5.2	...	24	4.9	...
Puerperal	...	...	...	36	7.5	...	35	7.1	...
Suicide	...	...	...	16	3.3	...	35	7.1	...
Other violence	...	...	...	85	17.6	...	91	18.6	...
Total per hundred thousand				...	105.7		99.7		87.4

Although in some individual cases there are slight increases under these headings there is a substantial reduction in the whole (from 99.7 to 87.4). The respiratory tuberculosis rate fell from 32.0 to 28.8, other tuberculosis from 3.9 to 2.2 pneumonia 9.4 to 6.4, bronchitis 2.9 to 2.2, and “other violence” from 18.6 to 13.7.

Total Deaths from Cancer and other Malignant Diseases.

Although there is a slight increase (from 680 to 697) in the number of deaths the rate remains at 1.4 owing to an increase in the population. It is satisfactory to note decreases in the two groups 45 to 65 and 65 to 75.

	1931	1932	1933	1934	1935
Age: Up to 45 ...	36	40	58	47	50
45 to 65 ...	263	257	251	255	235
65 to 75 ...	227	228	241	227	222
Over 75 ...	148	140	170	151	190
Total ...	674	665	720	680	697
Death rate ...	1.5	1.4	1.5	1.4	1.4

Heart Disease.

This disease still ranks as the most important cause of death and there was a further increase last year, the most substantial part of which is found under the heading over 75 years of age.

Year	1932	1933	1934	1935
Age: Up to 45 ...	57	55	56	54
45 to 65 ...	206	268	242	278
65 to 75 ...	376	358	424	385
Over 75 ...	552	537	528	597

Cause of Death among persons aged 65 and upwards	Year 1933		Year 1934		Year 1935	
	Number	Rate per 1,000 of the population	Number	Rate per 1,000 of the population	Number	Rate per 1,000 of the population
Heart Disease	895	1.9	952	1.9	982	2.0
Cancer ...	411	0.9	378	0.8	412	0.8
Bronchitis ...	122	0.3	103	0.2	107	0.2
Cerebral Hæmorrhage	197	0.4	216	0.4	236	0.5
Nephritis ...	96	0.2	125	0.3	113	0.2
Influenza ...	127	0.3	20	0.04	25	0.05
Pneumonia ...	77	0.2	78	0.2	67	0.13

Infant Mortality.

This is the number of deaths of children under one year of age per thousand births registered in the same period. During 1935 the rate was 40 as compared with 39 (the lowest recorded) in the previous year. With such low rates as can now fortunately be recorded an increase or decrease of one or two deaths considerably affects the position in any district in any one year. Taking the average infant mortality over the last three years together, the rates were highest in the following districts :—

(Urban)				(Rural)			
Christchurch	...	...	51	Andover	...	...	52
Eastleigh	...	...	50	Petersfield	...	...	51
Romsey	...	...	50				

and lowest in the following:—

(Urban)				(Rural)			
Andover	...	...	31	Hartley Wintney	...	...	30
Fareham	...	...	37	Kingsclere and Whitchurch	...	...	34
Petersfield	...	...	24	New Forest	...	...	34
Winchester	...	...	37				

Deaths of Children under One Year since 1925.

Year	Urban Districts		Rural Districts		Administrative County		Rate in England and Wales
	Number	Rate	Number	Rate	Number	Rate	
1925	188	51	214	52	402	52	75
1926	173	50	197	48	370	48	70
1927	157	46	205	51	362	48	69
1928	159	44	198	47	357	46	65
1929	211	60	213	52	424	56	74
1930	156	44	180	44	336	44	60
1931	161	44	153	38	314	41	66
1932	184	44	174	51	358	47	65
1933	207	51	159	51	366	51	64
1934	163	40	126	39	289	39	59
Average 1925-1934	176	47	182	47	358	47	67
1935	164	39	130	41	294	40	57

Cause of Death among children under 12 months of age	Year 1934			Year 1935		
	Number	Percentage of total deaths under 12 months	Rate per 1,000 live births	Number	Percentage of total deaths under 12 months	Rate per 1,000 live births
Congenital Debility...	172	58.5	23.3	184	62.6	24.9
Respiratory Diseases	56	19.4	7.5	47	16.0	6.4
Diarrhoea	10	3.5	1.3	12	4.1	1.7
Whooping Cough ...	4	1.4	0.5	4	1.4	0.5

The following table shows how the various causes of death among infants under twelve months of age have varied in the past ten years:—

	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	Av. for 10 years 1926-35
Diarrhoea	4.7	1.5	2.9	3.9	2.1	2.0	3.6	2.1	1.3	1.7	2.6
Respiratory diseases ...	7.4	7.2	6.0	11.3	6.4	6.5	7.9	6.7	7.5	6.4	7.3
Congenital debility ...	26.3	24.3	26.1	26.5	23.5	24.2	26.8	32.4	23.3	24.9	25.8
Other Causes	9.6	15.0	11.0	14.3	12.0	8.3	8.7	9.8	6.9	7.0	10.3
Total	48.0	48.0	46.0	56.0	44.0	41.0	47.0	51.0	39.0	40.0	46.0

With an Infant Mortality rate of 40 as compared with 39 in the year 1934 it is not to be expected that there would be any great variation in the special groups and it will be seen that while there was a slight decrease in the deaths from respiratory diseases there were trifling increases in the other three sections. Congenital debility is still the stumbling block to further reduction in infant deaths.

Maternal Mortality.

The accompanying table shows the Maternal Mortality of this County compared with that of England and Wales since 1925, calculated on live births and since 1928 on total births.

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	Average 1925-1934	1935
Administrative County :												
Live Births	4.27	3.04	2.67	2.94	3.67	3.79	2.87	5.53	5.00	4.77	3.86	5.26
Total Births					3.54	3.67	2.77	5.34	4.84	4.61	—	5.08
England and Wales :												
Live Births	4.08	4.12	4.11	4.42	4.33	4.40	4.11	4.21	4.51	4.60	4.29	4.10
Total Births				4.25	4.16	4.22	3.94	4.04	4.32	4.41	—	3.93

During 1935 the number of women reported to have died as a result of pregnancy or illness connected therewith was 39. These deaths are discussed later (page 33).

General Provision of Health Services for the Area.

(i) PUBLIC HEALTH OFFICERS.

County Medical Officer of Health and Chief Tuberculosis Officer.

H. L. Cronk, M.A., M.D., B.Ch., M.R.C.S., L.R.C.P., D.P.H.

Deputy County Medical Officer,

W. J. Hart, B.A., M.B., B.Ch., M.R.C.S., M.R.C.P., D.P.H.

Chief Clinical Tuberculosis Officer, Resident Medical Officer of Chandlers Ford
Sanatorium and Medical Officer of V.D. Clinic, Winchester.

Assistant County Medical Officers:

	A.C.M.O.	A.S.M.O.	T.O.	V.D.	M.O.H. of L.S.A.
M. Avent, M.A., M.D., B.Ch., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	{ Basingstoke R.D., Hartley Wintney R.D.
A. Capes, M.D., M.B., B.S., M.R.C.S., L.R.C.P.	—	—	Whole-time	(Resident M.O. of Mount Sanatorium)	
A. A. Cockayne, B.A., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	—
A. E. Druitt, M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	Yes	—	—
Audrey M. Hughes, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	—
*Hilda M. P. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	Aldershot Cl. (Women)	—
H. D. Kelf, M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	{ Basingstoke U.D., Kingsclere & Whitchurch R.D.
B. L. Lloyd, M.B., Ch.B., D.P.H.	—	—	Yes	Aldershot Cl. (Men)	
W. F. T. McMath, M.B., B.Ch., M.R.C.P., D.P.H.	Yes	Yes	Yes	—	Fareham U.D.
C. C. Morrell, M.D., L.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	{ Christchurch U.D. Ringwood & Fordingbridge R.D.
A. B. Shed, M.B., Ch.B., D.P.H.	Yes	Yes	—	—	
W. Simpson, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	Andover R.D.
W. S. Slater, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	{ Petersfield U.D. Petersfield R.D. Havant & Waterloo U.D. Romsey U.D.
G. Tate, M.R.C.S., L.R.C.P., D.P.H.	Yes	Yes	—	—	
					{ Romsey & Stockbridge R.D.

*Half Time Assistant County Medical Officer.

Dental Surgeons:

R. T. Hale, L.D.S.
T. McCLELLAND, L.D.S.
J. S. Roberts, L.D.S.
E. J. TAYLOR, L.D.S.

E. S. KENCH, L.D.S.
D. H. OLIVER, L.D.S.
A. J. H. Seymour, L.D.S.

Ophthalmic Surgeon (Part-Time):

R. H. Balfour Barrow, M.D., Ch.B., D.O.M.S., (Lond.).

County Analyst:

A. Prideaux Davson, A.R.C.Sc. (Lond.), F.I.C., F.C.S.

Superintendent Health Visitor:

Miss E. Stevenson, C.M.B., R.S.I.

Health Visitors and School Nurses:

Miss F. R. Back, C.M.B., R.S.I.	Miss M. F. Hayler, C.M.B.
Miss E. G. Barker, C.M.B., R.S.I.	Miss M. E. Hunt, C.M.B.
Miss B. C. Bendall, C.M.B., R.S.I.	Miss A. G. Hybart, C.M.B., R.S.I.
Miss C. Bowker, C.M.B.	Miss M. A. Kavanagh, C.M.B.
*Miss M. Briscoe, C.M.B., R.S.I.	Miss G. Kennedy, C.M.B.
Miss R. Butler, C.M.B., R.S.I.	Miss J. Langham, C.M.B., R.S.I.
*Miss L. A. Carr, C.M.B.	Miss M. Massiah, C.M.B.
Miss F. Carter, C.M.B., R.S.I.	Miss S. McDermott, C.M.B.
Miss O. Chubb, C.M.B., R.S.I.	Miss M. M. McKee, C.M.B., R.S.I.
*Miss E. H. Clappen, C.M.B., R.S.I.	Miss N. Pearce, C.M.B., R.S.I.
Miss E. K. Conner, C.M.B., R.S.I.	Miss M. C. Pritchard, C.M.B., R.S.I.
Miss E. G. Cooke, C.M.B., R.S.I.	Miss B. Reynolds, C.M.B.
Miss M. Cooper, C.M.B., R.S.I.	Miss M. E. Roe, C.M.B., R.S.I.
Miss C. O. Dare, C.M.B., R.S.I.	Miss F. E. Rooke, C.M.B.
Miss L. Elliott, C.M.B., R.S.I.	Miss L. E. C. Smith, C.M.B.
Miss R. Ellis, C.M.B., R.S.I.	Miss K. E. Teal, R.S.I.
*Miss A. Gullick, C.M.B., R.S.I.	Miss W. V. Vickery, C.M.B.
Miss B. B. Harrington, C.M.B., R.S.I.	Miss E. B. Wardley, C.M.B., R.S.I.

District Nurses (Part-Time Health Visitors):

Miss E. F. Edney, C.M.B.	Miss D. E. Plowman, C.M.B.
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All Health Visitors hold certificate of General Training with the exception of those marked thus *.

Dental Nurses:

Miss F. M. Barrington, C.M.B.	Miss D. Morley, C.M.B.
Miss E. D. Calder, C.M.B.	Miss K. A. Ody.
Miss W. B. Fowgies.	Miss E. Thomson.
Miss M. C. Moriarty.	

- (ii) (a) *Laboratory Facilities.* The Laboratory provided by the County Council continues to deal with all varieties of chemical and bacteriological work in connection with the health services of the County.
 - (b) *Ambulance Facilities.* A re-survey of the ambulance facilities has been made during the year and these appear adequate both from the point of view of numbers of ambulances and their situation, to deal with all ordinary emergencies.
 - (c) *Nursing in the Home.* Nursing in the home is carried out by Nurses employed by District Nursing Associations and is not subsidised by the County Council except through contributions made by the Public Assistance Committee.
 - (d) *Clinics and Treatment Centres.* The only alteration under this head is the transference of the Venereal Diseases Clinic and Tuberculosis Dispensary from County Council premises in Aldershot to a building belonging to the Town Council; the other County Council activities formerly carried out at Aldershot viz. in connection with school children, have been transferred to Farnborough. The Tuberculosis Dispensary sessions at Andover were reduced from two to one a week as from 1st October, 1935.
 - (e) *Hospitals: Public and Voluntary.* During the year extensive alterations have been made at the County Council's Smallpox Hospital at Winchester whereby the water supply has been improved, quarters provided for caretaker and nursing staff and a system of sewerage instituted.
2. (i) No developments or alterations have taken place during the year in connection with the administration of the institutional medical services transferred from the late Boards of Guardians under the provisions of the Local Government Act, 1929, or subsequently provided under the Public Health or Local Government Acts,
 - (ii) or in the arrangements for Poor Law Medical Out-Relief.
 - (iii) Institutional provision for the care of Mental Defectives is not dealt with by the Public Health Department.

Maternity and Child Welfare.

(A) Maternity.

Ante-Natal Care.

The provision made in this County for medical ante-natal care includes : —

- (a) Medical examination and advice at clinics.
- (b) Similar examination and advice at doctor's surgery or at woman's home.
- (c) Reference to the medical officer in charge of obstetric beds at certain hospitals for a second opinion where institutional confinement appears desirable.
- (d) In addition provision is made for dental treatment to be given by the Council's Dental Surgeons on the recommendation of Medical Officers of ante-natal clinics which treatment includes any dentures consequently required.
- (e) Extra nourishment can also be recommended by the Medical Officers of ante-natal clinics or others in a responsible position and, after investigation of the financial need, this can be supplied by the Public Health Committee.

(a) *Ante-natal Clinics.*

The attached table gives information concerning the arrangements for examination of women at clinics and the work done during 1935. 31 clinics were in operation during 1935, the clinics at New Milton and Shedfield having been discontinued, and a new clinic at Fleet having been opened. The staffing remained on the same lines as in 1934. A new method is being tried during 1936 which, it is hoped, will more closely approximate the clinic system to the ideal of each medical practitioner who is so qualified undertaking the medical ante-natal care of women who would be his patients if the services of a doctor should be needed at the confinement.

The Clinics held at the Royal Hants County Hospital, Winchester, and at the General Infirmary, Salisbury, are available not only for cases sent up for consultation but for "ordinary" cases from the neighbouring County area ; these latter are the only cases included in the table following.

Clinic	Place of Meeting	Day of Month when held	Medical Officer in Charge during 1935	Attendances during 1935		
				No. of Meet- ings	Cases	Total Attend- ances
Alresford ...	Town Hall (upstairs)	1st Monday 2.0 p.m.	A. M. Hughes	12	82	130
Alton ...	Inwood Cottage Hos- pital Out-Patient Department	4th Tuesday 2.0 "	H. Yates	13	120	170
Andover ...	C.C. Health Centre, 70, Junction Road	1st Monday 2.30 " 3rd Monday " 4th Monday "	J. A. Balek-Foote } M. F. Hope } A. B. Simmons }	36	184	312
Basingstoke ...	C.C. Health Centre, Garth House, Castons Road	2nd, 3rd and 4th Wednesdays 2.0 p.m.	H. K. Williams	36	196	414
Botley ...	The Catherine Wheel	1st Tuesday 2.30 "	A. S. Pern	12	35	80
Broughton ...	Village Hall	1st Wednesday 1.30,,	G. Tate	10	15	39
Christchurch ...	C.C. Health Centre, Millhams Road	2nd and 4th Mondays 3.0 "	A. W. Davidson	24	80	153
Cove ...	St. Christopher's Church Room	4th Friday 2.30 "	A. M. Hughes	12	32	51
Eastleigh ...	C.C. Health Centre, Chamberlayne Road	2nd and 4th Mondays 2.0 "	R. R. Garrett	24	146	251
Fareham ...	Parish Hall	1st and 3rd Mondays 2.30 "	W. S. Stevenson	24	104	157
Farnborough ...	St. Martin's Club Rooms	1st Wednesday 2.30,,	J. M. Forsyth	12	64	112
(1) Fleet ...	Church Institute	2nd Tuesday 2.30 "	G. V. Steward	11	62	110
(2) Gosport ...	War Memorial Hospital Out-Patient Depart- ment	1st Thursday 2.30 " 2nd Thursday " 3rd Thursday " 4th Thursday "	N. Braham } N. W. Berry } C. Lamplough } C. N. Suter }	45	281	449
Grayshott ...	School Clinic	1st Wednesday 2.45,,	S. Gray	12	15	52
Hartley ...	Women's Institute Hut	1st Wednesday 2.30,,	R. H. Scott	12	49	74
Wintney ...						
Havant ...	C.C. Health Centre, Park Way	1st Friday 2.0 "	J. R. Rickett	12	71	129
Kings ...	Village Hall	2nd Tuesday 1.30 "	G. Tate	11	11	19
Somborne ...						
Liphook ...	Church Room	4th Thursday 2.0 "	A. M. Hughes	12	49	101
Liss ...	British Legion Hall	1st Wednesday 2.30,,	W. L. Scott	12	32	86
(8) Lymington ...	Public Assistance Institution, 20, New Street	1st and 3rd Mondays 2.30 p.m.	G. H. Pitt	24	102	205
Lyndhurst ...	Cottage Hospital	1st Friday 2.0 "	E. H. Sears	12	37	74
Micheldever ...	Northbrook Hall	2nd Friday 1.30 "	A. M. Hughes	11	19	37
(4) New Milton ...	The Institute (upstairs)	2nd Monday 2.30 "	E. C. Huddy	4	12	21
Petersfield ...	Ramshill	1st Monday 2.0 "	R. C. Cooke	12	71	143
(5) Ringwood ...	Conway Hall	1st Monday 2.30 "	G. E. Scott	12	35	70
Salisbury ...	General Infirmary	Tuesdays and Thursdays 11 a.m.	J. Armitage	104	9	11
Totton ...	C.C. Health Centre, Rumbridge Street	1st and 3rd Mondays 2.30 p.m.	L. Campbell	24	122	291
Waterlooville ...	St. George's Hall	1st Friday 2.30 "	W. L. Cowardin	12	73	105
(6) Whitehill ...	Village Hall	3rd Tuesday 2.30 "	A. M. Hughes	12	50	106
Winchester ...	Royal Hants County Hospital	1st and 3rd Tuesdays, 11 a.m.	C. J. Penny	24	7	12
Woolton Hill ...	Church Hall	3rd Wednesday 1.15 p.m.	H. D. Kelf	11	16	33
31 Clinics			TOTAL	604	2181	3997

(1) Opened February. (2) Dr. Braham left in May and Dr. Berry conducted Clinic on 1st Thursday as from September. (3) Changed to Thursdays in June. (4) Closed June. (5) Dr. J. A. Easton Scott as from April. (6) Changed to 2nd Monday in February.

The work of the clinics has shown a satisfactory expansion, 2,181 women having made 3,997 attendances, as compared with 1,978 and 3,539 in 1934 (excluding Salisbury).

During the year 1935, 52 cases were referred to their own medical attendant for treatment; 39 were referred to a Consulting Clinic for further advice; 29 attended and of these 14 were recommended for admission to an Institution and one was referred for a surgical opinion. Two cases were referred for X-ray diagnosis and one was subsequently admitted.

In addition to the above, 108 cases attended where the possibility of admission to a County Council maternity bed was raised. 104 of these 108 cases were admitted to an Institution.

Of the 32 cases recommended for admission to an Institution, 27 were admitted and the other five for various reasons were confined at home.

(b) Other Medical Examinations.

Apart from the work carried out at the clinics medical practitioners examined and advised 365 women, involving 480 examinations at the woman's home and 145 at the doctor's surgery. This provision, vital for the medical care of a number of women for whom, because of distance or other reasons, it is impossible at any time to attend one of the established clinics, is also of use when this impossibility only occurs later in pregnancy so that the return visits to a clinic at this stage are unable to be made.

(c) Consulting Clinics.

Arrangements have been made for the Medical Officer in charge of obstetric beds at the Hospitals at Aldershot, Boscombe, Salisbury and Winchester, to which abnormal maternity cases are admitted, to examine and advise on cases suspected of abnormality. Similar arrangements are being made with Portsmouth to commence on April 1st, 1936.

At these Consulting Clinics, 29 women attended, having been sent from Ante-natal Clinics for further advice, or with a view to Hospital treatment. In addition, 10 were referred for examination at Consulting Clinics with a view to Institutional treatment. As a result, 24 were admitted to Hospital and 7 were admitted to the ordinary wards for termination of pregnancy. Forty-four other women were sent as a result of other ante-natal examinations, of whom 30 were admitted, and one was admitted to the ordinary ward for termination of pregnancy.

Special arrangements were made during the year 1935 for the provision of X-ray examinations at Emsworth and Lymington Cottage Hospitals. Arrangements at other Institutions are being dealt with during the present year.

(d) Dental Treatment.

In order to reduce the possibility of sepsis arising from a septic condition of the mouth, and to improve the expectant mother's condition generally, the County Council have made provision for expectant mothers to receive dental treatment by the Council's Dental Surgeons on the recommendation of the Medical Officer in charge of the Ante-natal Clinic. In cases where the treatment cannot be completed before confinement, it is continued afterwards. During the year the following work was carried out (the figures in brackets refer to 1934):—

No. treated	Attendances made	No. of fillings	No. of extractions	No. of general anæsthetics	No. of other operations	No. of cases in which dentures were supplied
260 (224)	627 (500)	83 (87)	1350 (756)	270 (158)	56 (228)	42 (101)*

* Includes nursing mothers.

(e) Extra Nourishment.

This has been recommended by Medical Officers and supplied to expectant mothers as follows:—

No. of women for 3 months	...	129
" " " " 6 "	...	21
" " " " 9 "	...	3
Total		153

133 expectant mothers were supplied with milk only, 17 with milk and eggs, 2 with milk and butter and 1 with milk and cod liver oil and malt. During the year 11,211 $\frac{3}{4}$ pints of milk, 1,144 eggs, 14 pounds butter and 5 pounds cod liver oil and malt were provided.

11 cases were recommended for extra nourishment which was not granted. In 5 cases the financial circumstances were above the scale, 2 cases were admitted to Hospital, 3 did not wish to apply, and 1 case left the County area.

The Work of Ante-Natal Clinics.

The scope of the ante-natal care given as judged by the criteria available on the medical records and analysed in my report for 1934 uniformly improved during 1935.

A larger number of women were examined during the last four weeks of pregnancy and in a larger proportion the fit of the presenting part was recorded. As is natural and as was seen in the figures for 1934, the proportion of women seen during the last four weeks at home or at the doctor's surgery was distinctly higher than at the clinics, but according to the records this proportion was still only 62 per cent. The difficulties in getting an ideal supervision are in some cases insuperable and in many cases very great so that it is a matter for congratulation that progress is being made steadily though slowly.

Of the women attending Ante-natal Clinics a number were confined eventually in hospitals or other institutions. Out of 1,459 cases of whom there are records of any sort of the result of the confinement, which took place otherwise than in a hospital or institution except from the woman's own choice, it is noted that in 147 there was some difficulty or delay in first or second stage resulting in the need for the services of a doctor; that is practically 1 in 10. Too much importance cannot be attached to these figures since the decision as to the difficulty is primarily made by the midwife and in some at least had resolved itself by the time the doctor arrived, while in a number the delay was not so much due to obstetrical disproportion as to muscular or nervous conditions.

Of cases seen otherwise than at clinics it is interesting to observe that the proportion is considerably higher, namely 50 out of 311 completed cases.

Post-Natal Examinations.

The number of these does not increase although in addition to those who are recorded as having been examined a certain number re-attend and report to the Medical Officer.

Of the 1,459 cases recorded from Ante-natal Clinics as completed during the year, 116 received post-natal examinations; 82 of these were found normal and in the others the following defects recorded (in each of two cases two defects were noted):—

Subinvolution	...	12	Cystocele	...	...	2	Femoral hernia	...	1
Retroversion	...	7	Rectocele	...	...	1	Mastitis	...	1
Prolapse of uterus	...	2	Vaginal tear	...	...	1	Anæmia	...	1
Cervical tear	...	2	Leucorrhœa	...	...	2	Weak abdominal		
Cervical erosion	...	1	Varicose veins	...	...	1	muscles	...	2

Among cases not seen at clinics (311 in number) 37 were examined postnatally and 30 found normal. Eight defects were discovered (in one case two defects were noted), namely :—

Subinvolution	...	1	Vaginal prolapse	...	1	Fibroid	...	...	1
Retroversion	...	1	Piles	...	...	Anæmia	...	...	3

Birth Control Clinics.

This matter was considered by the Maternity Sub-Committee at several meetings and a decision was arrived at in June 1935 that when a report has been received from the Medical Officer in charge of any properly conducted Birth Control Clinic that a woman whose residence is in the administrative county, excluding Aldershot and Winchester, has needed and received advice on contraception because pregnancy would be detrimental to health, the County Council will pay the charges made by the clinic, these to be :—

10s. for one or two visits which might be necessary during the first year and the necessary appliances for that year ; and further visits at the rate of 5s. per patient per year.

On receipt of such a report from the Medical Officer the County Medical Officer decides whether any such case is one for which the Committee can accept this financial responsibility.

Information to this effect was given to the Birth Control Clinics at Aldershot, Basingstoke and Winchester.

During the year 1935 applications were received for payment by the County Council in 9 cases and in 8 of these payment was made, the circumstances of the ninth patient being such that it was considered the patient could pay.

Midwifery Service.

Provision of Midwives.

The number of certified midwives who notified their intention to practise during the year 1935 was 385, of whom 382 were trained and 3 bona fide. They attended as midwives 4,972 births out of a total of 6,921 notified from the area of the administrative county, or 72%.

In 1923 an arrangement was entered into whereby the Hampshire County Nursing Association undertook to provide midwifery services in those parts of the County where such provision was lacking on the understanding that the actual out-of-pocket expenditure thus incurred would be refunded by the County Council. This arrangement still continues and in the year 1935-36 the amount so repaid was £63.

Since the year 1925 under the authority of a circular issued by the Ministry of Health there has also been paid to the County Association a sum of £250 a year in connection with the supply and training of midwives and in each of the last five years a further £50 has been paid to enable the Association to provide and maintain a second motor-car.

The foregoing payments were taken into consideration when fixing the amount of the grant to be paid to the County Nursing Association under the provisions of Section 101 of the Local Government Act, 1929, and ultimately the figure was fixed at £1,760. This amount of £1,760 included an item of £1,390 representing the payments made by the Ministry direct to the Association in respect of midwifery and maternity cases attended by the nurses of affiliated District Nursing Associations.

The total actually paid to the Association by the Council during the year 1935-36 was £2,039 15s. 10d.

The District Nursing Associations affiliated to the Hants County Nursing Association number 117 (3 of which do not deal with midwifery cases) having 133 nurses (127 of whom act as midwives).

District Nursing Associations unaffiliated were in existence at Grayshott and Stockbridge. These two Associations employ two nurses respectively who act as midwives. Unaffiliated Associations not dealing with midwifery cases exist at Basingstoke, Eastleigh and Purbrook.

In addition to the midwives provided by District Nursing Associations 81 independent midwives practise in various parts of the County; also 69 practise in hospitals and Public Assistance Institutions, and 31 living outside the County take occasional cases within the Administrative County area.

This year there has been a pause in amalgamations and re-groupings of Associations but no Association has been dissolved.

Districts, which have been able to arrange for penny weekly collections and which use the County Rules and Collecting Cards, report increased contributions and it is hoped these schemes will gradually extend throughout the County.

The Districts are beginning to appreciate the desirability of uniformity both as regards payments and benefits received by subscribers to the local Associations.

One District Association has received a Car Grant as it has extended its area of activity.

Inspection of Midwives.

During the year 368 routine inspections were paid by the Inspector or her assistant; in addition 218 special inspections were carried out. Although it is the rule to inspect each midwife in this way twice a year there are many instances where the notifications are not received until the latter part of the year; it is, therefore, not possible to carry out this rule in every case. Payment made to the Hampshire County Nursing Association for their services in respect of these inspections amounted to £329 during the year ended the 31st March, 1936.

It was found necessary to report one case to the Committee during the year 1935. This was in connection with a midwife who failed to give her patients sufficient ante-natal supervision. This midwife had been reported to the Committee on four previous occasions, and had also been reprimanded several times, and in view of this and of the fact that she was getting on in years it was decided to suggest to her the advisability of retirement from the practice of midwifery.

Suspension from Practice—Compensation.

Compensation for loss of practice through contact with infection was paid in five cases, involving a sum of £14 8s. 6d.

Midwives' Fees—Necessitous Cases.

In 19 necessitous cases the midwife's fee was paid by the County Council, the fees so paid amounting to £27 2s. 6d.

Fees of Doctors called in by Midwives.

The number of births notified in 1935 was 6,921 as compared with 6,851 in the previous year, and of these 4,972 and 5,064 respectively were notified by midwives. The percentage dealt with by midwives has therefore dropped to 72 as against 74 last year. In 1929 it was 78, in the next two years it fell to 73 and 72 respectively, in 1932 it was 75, and in 1933, 74. The number of calls for medical help was rather higher than the previous year, 2,463 as against 2,335. The doctor is sometimes called more than once to the same patient.

The doctor's bill was paid in 1,872 cases during 1935 as against 1,651 in the previous year, or 38 per cent., in 1932 it was 30 per cent. The total payments increased from £2,705 to £3,146 while the receipts were £1,049 as against £999. This represents an increase in nett expenditure of £391 (from £1,706 to £2,097).

The following tables give details of the doctors' accounts paid during the past seven years, together with the amounts received. Details for insured and uninsured cases are also given separately.

Year	BIRTHS			No. of Calls for Medical Help	DOCTORS' BILLS PAID			Receipts	Net Cost
	No. notified	Notified by Midwives			No. of Cases	Percent- age of Midwives' Cases	Amount		
		No.	Percentage						
1935	6921	4972	72	2463	1872	38	£ 3146	£ 1049	£ 2097
1934	6851	5064	74	2335	1651	33	2705	999	1706
1933	6795	5001	74	2229	1649	33	2729	1002	1727
1932	7284	5438	75	2157	1615	30	2594	1042	1552
1931	7309	5252	72	2061	1674	32	2840	1090	1750
1930	7442	5415	73	2071	1546	29	2502	1047	1455
1929	7359	5713	78	2038	1577	28	2538	854	1684

INSURED.

Year	7s. 6d. Pre- miums No.	5s. Pre- miums No.	TOTAL	Percent- age of Mid- wives Cases	No. of Calls for Medical Help	DOCTORS' BILLS PAID			Re- ceipts	Net Cost
						No. of Cases	Percentage of Insured Cases	Amount		
								£	£	£
1935	1179	1806	2985	60	1432	1206	40	2182	894	1288
1934	1092	1806	2898	57	1341	1019	35	1723	861	862
1933	1119	1758	2877	58	1317	1040	36	1880	859	1021
1932	1148	1929	3077	57	1273	1055	34	1806	913	893
1931	1163	1980	3143	60	1302	1075	34	1953	931	1022
1930	1103	1976	3079	57	1238	993	32	1696	907	789
1929	—	3050	3050	53	1282	1068	35	1831	763	1068

UNINSURED.

Year	No.	Percentage of Midwives' Cases	No. of calls for Medical Help	DOCTORS' BILLS PAID			Receipts	Net Cost
				No. of Cases	Percentage of Uninsured Cases	Amount		
1935	1987	40	1031	666	34	£ 964	£ 156	£ 808
1934	2166	42	994	632	29	981	138	843
1933	2124	42	912	609	29	849	143	706
1932	2361	43	884	560	24	788	129	659
1931	2109	40	759	599	29	887	159	728
1930	2336	43	833	553	23	806	140	666
1929	2663	47	756	509	19	707	91	616

Insured Cases.

There was an increase in the numbers in the case of first pregnancies; the number in subsequent pregnancies remained the same as last year. The first figure rose to 1,179 from 1,092; representing a total increase of 87. The percentage of midwives' cases which adopted this method in 1929 was 53, while in the next year it rose to 57, and in 1931 it increased further to 60. In 1932 it was 57, in 1933, 58, last year it again dropped to 57, and this year has risen to 60.

It may be mentioned that the net cost to the Council in the case of an insured person in 1929 was 7s. while the uninsured cost 4s. 8d. In 1930 the corresponding figures were 5s. 2d. and 5s. 8d., while in 1931 they were 6s. 6d. and 6s. 10d., in 1932 they were 5s. 9½d. and 5s. 7d. Last year they were 5s. 11¼d. and 7s. 9½d., being 7s. 1d. and 6s. 7d. respectively in 1933. This year they were 8s. 7½d. and 8s. 1½d.

In the report for 1930 it was mentioned that the percentage of insured cases in which the doctor's bill was paid had fallen to 32 as compared with 35 in the previous year, but in 1931 and 1932 the figure rose to 34, in 1933 it rose further to 36 and last year dropped again to 35. This year it has risen to 40. The payments totalled £2,182 as compared with £1,723 last year, £1,880 in 1933, £1,806 in 1932, £1,953 in 1931 and £1,696 in 1930, while the corresponding receipts were £894, £861, £859, £913, £931 and £907. This year the net expenditure is £1,288.

Uninsured Cases.

The percentage of cases that failed to insure is now down to 40 as compared with 42 in 1934, 43 in 1930, 47 in 1929 and 55 in the year 1926 when the scheme came into operation. The doctor was called on 1,031 occasions as against 994 in the previous year and his account was paid in 666 as compared with 632. The proportion of uninsured cases in which the doctor's account is paid by the County Council has risen to 34 per cent.; in 1933 and 1934 it was 29 per cent. of the cases dealt with as compared with 24 per cent. in 1932 and 29 per cent in 1931.

In the earlier days of the Insurance Scheme it was frequently necessary to call attention to the apparent disparity in the practice of midwives in relation to insured as compared with uninsured cases: the doctor was frequently called to the insured case and very infrequently to the other. In 1929 the difference in the percentage of bills paid was 16, in 1930 it fell to 9, in 1931 it came down to 5, while in 1932 the difference was 10. In 1933 the difference was 7, in 1934 6 and this year it remains the same.

In the report for 1931 reference was made to the fact that despite the issue of circulars and other means to bring the matter to the notice of midwives, a number of cases had occurred in which the insurance premium was sent too late with the result that when the doctor's services were required the patient was not insured. This year there were 67 such cases in first pregnancies and 121 in others. These cases, of course, are shown in the accompanying uninsured table, and the amounts received in premiums are shown as receipts in respect of uninsured cases. The total amount so received was £43. In calculating the payment, if any, to be made by the patient, these sums were taken into consideration.

The results obtained from an examination of these tables may be summarised as follows. In each case the figure for 1935 is given and is followed in brackets by the corresponding figures for 1934.

1. Percentage of confinements notified by midwives, 72 (74).
2. For every 100 cases notified by midwives the doctor was called 50 (46) times.
3. For every 100 insured cases the number of calls was 48 (46). For every 100 uninsured cases the number was 52 (46).
4. For every 100 cases notified by midwives the doctor's bill was paid by the Council in 38 (33). The average amount was £1 13s. 7d. (£1 12s. 9d.).
5. For every 100 insured cases notified by midwives the doctor's bill was paid in 40 (35). The average amount was £1 16s. 2d. (£1 13s. 10d.). For every 100 uninsured cases notified by midwives the doctor's bill was paid in 34 (29). The average amount was £1 8s. 11d. (£1 11s. 0d.).
6. For each insured case the gross payment by the Committee was 14s. 7d. (11s. 10½d.). The corresponding amount received was 6s. (5s. 11d.). The net cost per case was 8s. 7½d. (5s. 11½d.).
7. For each uninsured case the gross payment by the Committee was 9s. 8¼d. (9s.). The corresponding amount received was 1s. 6¾d. (1s. 3d.). The net cost per case was 8s. 1½d. (7s. 9½d.).
8. Total payments during the year £3,146 (2,705). Receipts £1,049 (999). Net cost £2,097 (£1,706).

The following is an analysis of the conditions for which medical help was called by midwives during the year ended 31st December, 1935, distinguishing insured from uninsured cases:—

Ante-Natal.						Insured.		Uninsured.	
Small pelvic measurements	...	...	...	...	...	12	...	3	...
Inflammation of and pain in leg	...	...	...	...	...	4	...	11	...
Varicose veins	...	...	...	...	...	12	...	11	...
Pains in abdomen and side	...	...	...	...	...	19	...	37	...
Rash, ulcers, etc.	...	...	...	...	...	5	...	5	...
Ante-partum hæmorrhage	...	...	...	...	...	29	...	70	...
Threatened abortion	...	...	...	...	...	5	...	52	...
Abortion	...	...	...	...	...	2	...	52	...
Swelling of limbs, Albuminuria, etc.	...	...	...	...	...	107	...	112	...
Debility, faintness, etc.	...	...	...	...	...	27	...	36	...
Abnormal position of foetus	...	...	...	...	...	1	...	—	...
Toxæmia of pregnancy	...	...	...	...	...	1	...	—	...
Vaginal discharge	...	...	...	...	...	4	...	13	...
Prolapse of uterus	...	...	...	...	...	1	...	2	...
Post-maturity, Induction of Labour, etc.	...	...	...	...	...	14	...	2	...
Other conditions	...	...	...	...	...	3	...	6	...
						246		412	
						(196)		(370)	
Labour.						Insured.		Uninsured.	
Inability to make out presentation	...	...	...	...	...	10	...	6	...
Complicated presentation	...	...	...	...	...	59	...	47	...
Obstructed labour	...	...	...	...	...	6	...	3	...
Uterine inertia	...	...	...	...	...	35	...	12	...
Exhaustion	...	...	...	...	...	6	...	7	...
Prolonged or delayed labour	...	...	...	...	...	239	...	57	...

Labour.						Insured.	Uninsured.
Retained membranes, adherent placenta	...	...	...	...	...	43	31
Post-partum hæmorrhage	...	...	...	...	...	15	17
Ruptured perineum	...	...	...	...	...	405	148
Fits (mother)	...	...	...	...	...	4	1
Post-labour vomiting	...	...	...	...	...	—	3
Other conditions	...	...	...	...	...	1	2
						<hr/> 823	<hr/> 334
						(753)	(312)
Lying-in.						Insured.	Uninsured.
Inflammation of breast, abscess, etc.	...	...	...	...	...	22	5
Vaginal discharge	...	...	...	...	...	2	5
Rise of temperature	...	...	...	...	...	60	54
Rapid Pulse	...	...	...	...	...	2	1
Malformation of child	...	...	...	...	...	19	16
Feebleness of child	...	...	...	...	...	60	77
Discharge from child's eyes	...	...	...	...	...	90	69
Fits, hæmorrhage, etc. (child)	...	...	...	...	...	11	15
Rash, septic spots, etc. (child)	...	...	...	...	...	9	6
Puffiness of hands and feet	...	...	...	...	...	4	1
Phimosis	...	...	...	...	...	19	5
Tongue-tie	...	...	...	...	...	2	1
Varicose veins of vulva, swelling, etc.	...	...	...	...	...	3	2
Cold, cough, bronchitis, etc. (child)	...	...	...	...	...	2	1
Pain in leg, abdomen, etc.	...	...	...	...	...	34	17
Subinvolution of uterus	...	...	...	...	...	3	2
Debility, faintness, etc.	...	...	...	...	...	13	4
Inability to breast feed	...	...	...	...	...	2	2
Other conditions	...	...	...	...	...	6	2
						<hr/> 363	<hr/> 285
						(392)	(312)
						Insured.	Uninsured.
Ante-Natal conditions	...	...	...	...	...	246	412
Labour	...	...	...	...	...	823	334
Lying-in	...	...	...	...	...	363	285
						<hr/> 1,432	<hr/> 1,031
						(1,341)	(994)

It is seen that there was in 1935 a total increase of 128 calls, i.e., an increase of 92 in both ante-natal conditions and during labour, and a decrease of 56 during the lying-in period.

Comparing the frequency of calls made by midwives during 1935 with the past years, besides the usual fluctuations two tendencies may be observed. Firstly the calls for ante-partum hæmorrhage, abortion and threatened abortion have been rising year by year since 1929, in which year they numbered 26.4 per thousand births notified by midwives, to 27.7, 28.3, 30.9, 33.0, 38.5 and 42.2 in this last year, although actually the calls for the last two conditions named are slightly lower.

Secondly, during 1935 the calls for swelling of limbs, albuminuria, toxæmia, etc., numbered 44.2 per thousand as against 36.7 in 1934, 34.2 in 1933 and 25.5 in 1932, 18.5 in 1931 and 21.4 in 1930, the calls for prolonged or delayed labour and for ruptured perineum have increased.

It may well be that this increase of frequency of midwives' calls for medical attention for these conditions is not only an index of greater care for their patients but an index also of greater frequency of the conditions. Quite possibly there is some connection between this increase of incidence of the above conditions, if a fact, with the increase in deaths from hæmorrhage and disorders of the musculature of the pelvic apparatus which is suggested by the unusual incidence of uterine rupture, etc., which is commented upon in the section on maternal mortality. This matter needs very careful consideration in view of the present standstill or rise in maternal mortality in spite of every administrative improvement. Is the increase of calls on the doctor for the conditions mentioned a purely local increase or is it reflected in other areas, and, if only in some, is it connected with an increase in certain causes of maternal deaths? If it is not simply a local occurrence to what is it due, general increase of nervous tension, unwise propaganda on the danger of maternity, nature of food and other habits of life? The rise in this County has certainly been steady for some years now and does seem to have some important significance.

Sterilized Maternity Outfits.

The practice of selling these outfits at cost price has been continued during the year. 82 Set A outfits and 47 Set B outfits were sold. Where the cost cannot be paid, owing to the financial circumstances of the patient, arrangements are made for the case to be specially considered. No such case was brought to notice during 1935.

Post-Graduate Instruction for Midwives.

No midwives were sent up for a special post-graduate course during the year, since the benefits obtainable were not as great as was hoped.

Lectures were arranged through the Health Department, these being given in Winchester as follows:—

15th June	...	Miss Thomas, Sister Tutor of the Maternity Hospital, Loveday Street, Birmingham. Subject: "Normal and Prolonged Labour."
22nd June	...	R. W. Knowlton, Esq., M.D., M.C.O.G., of Bitterne. Subject: "Puerperal Pyrexia and Puerperal Fever."
29th June	...	Miss Thomas, Birmingham. Subject: "Management of Breech Labours."
6th July	...	Dr. C. J. Penny, of Winchester. Subject: "Ante-partum Hæmorrhage."

The total cost, including lecturers' fees and travelling expenses and travelling expenses incurred by midwives, was £53 5s. 5d.

During the year the Inspector of Midwives was granted leave to attend a post-graduate course in London at a cost to the County Council of £6 3s.

INSTITUTIONAL ACCOMMODATION FOR MATERNITY CASES.

Beds are needed for the following classes of case:—

- i. Anticipated abnormal cases,
- ii. Emergencies arising before, during or after labour,
- iii. Septic cases,
- iv. Cases where the conditions for confinement at home are unsatisfactory.

Payment is made by the County Council for hospital accommodation for abnormal and emergency maternity cases at the following institutions:—

Hospital or Infirmary	Number of Beds available	No. admitted in 1935.			(A) Total Cost to County Council
		Abnormal	Emergency	Total	
Aldershot	12	28	11	39	£ s. d. 459 6 4
(1) Alton	No special accommodation	—	—	—	—
(2) Andover	3	4	10	14	80 3 11
(2) Boscombe	22	7	6	13	126 17 6
(2) Farnham	9	1	6	7	30 1 11
(1) Fleet	No special accommodation	—	—	—	—
(1) Romsey	3	1	2	3	6 2 8
(2) Salisbury	19	5	4	9	57 0 0
Winchester	8	29	44	73	981 3 9
Gosport	No special accommodation	—	10	10	38 8 10
Havant	No special accommodation	2	—	2	24 8 4
(2) Lyndhurst	5	—	—	—	—
(2) Portsmouth	66	—	1	1	11 5 0
(1) Reading	—	—	1	1	8 2 0
	—	77	95	172	1823 0 3

NOTES:

(A) The cost given here is not the net cost; sums recovered from patients have not been deducted.

1. Arrangements for emergency cases only.
2. There is no special number of beds allocated to this County but there is no difficulty in admission.

Apart from the provision subsidised by the County Council the following Hospitals in the County also take obstetric cases:—Basingstoke, Lymington, Portsmouth and Southampton, and in addition occasional urgent cases are taken in at other Cottage Hospitals. This accommodation is very strictly limited to an occasional urgent case.

The classification of maternity cases into abnormal and emergency presents some difficulty particularly with regard to cases of toxæmia which are in some respects all urgent although some are not strictly emergencies. In my report for 1932 I drew attention to this difficulty and strove in that year to classify from the reports obtained from the Hospitals toxæmia patients into abnormal or emergency according to the necessity for urgent treatment; this practice was also followed in my report for 1933. I find that correct classification on these lines is impossible, and the whole grouping was recast for the 1934 report. All

toxæmia cases are included in one group. In addition, I separated the returns from Hospitals dealing with emergency cases only on behalf of the County Council from the return from Hospitals dealing with all classes of abnormal pregnancy. Septic cases are not included in these tables.

i. Returns from Hospitals dealing with abnormal pregnancy shewing the reason for admission, operative procedure if any and immediate result to mother and child.

Reasons for Admission		Results to	
		Mother	Child
1. ANTICIPATED DIFFICULTY :—			
(a) Obstetrical—	38		
Induction	18	18	18
Cæsarian	7	7	6 1 died
Forceps	1	1	1
Version	1	1 (undelivered)	—
No interference	11	11	11
(b) Other—	18		
Induction	6	6	6
Forceps	1	1	1
No interference	11	11 (1 undelivered)	10
2. TOXAEMIA :—			
(a) Eclampsia—	10		
Induction	3	3	1 3 stillborn (twins)
Cæsarian	2	1 1 died	— 2 died
Forceps	1	1	1
No interference	4	4	4 (twins) 1 stillborn
(b) Other—	41		
Induction	12	12	9 4 stillborn*
Forceps	6	6	5 1 died
Cæsarian	3	3	2 1 stillborn* 1 died
No interference	20	20 (2 undelivered)	14 (2 cases of twins) 5 stillborn 2 died†
3. PYELITIS :—	5		
No interference	5	5 (1 undelivered)	4
4. ANTE-PARTUM HAEMORRHAGE :—	25		
Cæsarian	6	6	3 2 stillborn 1 died
Forceps	1	1	1
Version	1	1	1 stillborn
Induction	4	4	2 2 stillborn
No interference	13	13 (1 undelivered)	6 4 stillborn 2 died
5. DELAYED OR DIFFICULT LABOUR :—	22		
Cæsarian	7	6 1 died	7
Forceps	7	7	4 2 stillborn 1 died
No interference	8	8 (1 undelivered)	5 3 stillborn (twins)
6. OTHER EMERGENCY :—	5		
Hæmorrhage after abortion	1	1	—
Extensive perineal tear ...	1	1	1
Dead fœtus	3	2 1 died	3 stillborn
7. ADMITTED POST-NATALLY :—	4		
Retained products	3	3	3
Post-partum hæmorrhage	1	1 died	1 stillborn before admission

* Includes one case of twins, 1 satisfactory, 1 stillborn.

† " " " " " 1 satisfactory, 1 died.

The immediate results to mother and child can be summarised thus :—

Mother ... Satisfactory	157
Died	4
Discharged to be confined at home ...	6
Discharged for confinement elsewhere ...	1
Total ...	168

Child	...	Satisfactory	...	...	...	...	125
		Stillborn	...	...	...	...	31
		Died	...	...	...	...	11
		Abortion	...	...	...	...	1

ii. Returns from those Hospitals taking emergencies only.

Reasons for Admission					Results	
					Mother	Child
1. (a) OBSTETRICAL DIFFICULTY :—						
No interference	1	1				stillborn
(b) OTHER—						
Induction	1	1				died
5. DELAYED OR DIFFICULT LABOUR :—						
Hysterectomy	1		1 died			died before admission
6. OTHER EMERGENCIES :—						
Extensive perineal tear	1	1				1
Total ...	4	3	1 died		1	2 died 1 stillborn

The total number of women admitted under the arrangements made by the County Council for abnormal pregnancy is again increased this year from 151 to 172.

iii. Septic cases are admitted to a special isolation block at the Royal Hampshire County Hospital, Winchester, and also to the General Infirmary, Salisbury; the Royal Victoria and West Hants Hospital, Boscombe; Gosport War Memorial Hospital; Farnham Infirmary; and the Queen Charlotte's Hospital, Hammersmith. During the year 1935 cases were dealt with under these arrangements as follows :—

Institution.	Number.
Farnham Public Assistance Institution	4
Gosport War Memorial Hospital	3 (1 death).
Queen Charlotte's Isolation Hospital	1
Royal Hants County Hospital Winchester	14 (4 deaths).
Salisbury General Infirmary	1
Royal Victoria & W. H. Hospital, Boscombe	2
Southampton Borough Hospital	2 (1 death).
Havant Isolation Hospital	1
Total septic cases admitted	28

During the year 14 cases of puerperal fever were notified from the Administrative County.

iv. Other cases need institutional accommodation because confinement cannot be satisfactorily conducted at home. Under the arrangements as detailed in my report for 1932 the following cases were dealt with; in these no abnormality needing the special facilities available in the Hospitals previously mentioned was suspected.

						Number admitted.
Alton Public Assistance Institution ... ..	...	...	...	...	...	39
Aldershot Maternity Unit ... ..	...	...	...	...	...	2
Basingstoke Public Assistance Institution ... ..	...	...	...	...	...	15
Farnham Infirmary ... ..	...	...	...	...	...	1
Fordingbridge Public Assistance Institution ... ..	...	...	...	...	...	1
Gosport Public Assistance Institution ... ..	...	...	...	...	...	46
Gosport War Memorial Hospital ... ..	...	...	...	...	...	1
Lymington Public Assistance Institution ... ..	...	...	...	...	...	26
Petersfield Public Assistance Institution ... ..	...	...	...	...	...	12
Salisbury General Infirmary ... ..	...	...	...	...	...	6
Winchester Public Assistance Institution ... ..	...	...	...	...	...	53
Winchfield Public Assistance Institution ... ..	...	...	...	...	...	16
						218

The following tables includes all cases admitted to institutions under the County Council's scheme:—

INSTITUTION	Cases	Average Stay (days)	Total Cost	Cost per Patient per day	Average Cost per County Case
			£ s. d.	s. d.	£ s. d.
Aldershot Maternity Unit	41	19.9	472 11 4	11 7	11 10 6
Andover W.M. Hospital	14	18.8	80 3 11	6 1	5 14 7
Boscombe R.V. and W.H. Hospital	15	20.7	136 1 3	8 9	9 1 5
Royal Berks Hospital, Reading	1	18	8 2 0	9 0	8 2 0
Portsmouth Institution	1	25	11 5 0	9 0	11 5 0
Romsey and District Hospital	3	9	6 2 8	4 6	2 0 10
Salisbury General Infirmary	16	18.6	94 15 0	6 4	5 18 5
Southampton Institution	2	19	13 7 9	7 1	6 13 10
Winchester R.H.C. Hospital	87	24.7	1152 17 7	10 9	13 5 0
Gosport W.M. Hospital	14	45.2	50 1 10	1 7	3 11 7
Havant W.M. Hospital	2	23	24 8 4	10 7	12 4 2
Havant Isolation Hospital	1	20	12 12 0	12 7	12 12 0
Queen Charlotte's Isolation Hospital	1	13	6 16 6	10 6	6 16 6
Farnham P.A. Institution	12	17.6	42 6 11	4 0	3 10 7
Alton P.A. Institution	39	10.9	78 13 4	3 9	2 0 4
Basingstoke „	15	15.6	37 13 4	3 4	2 10 3
Gosport „	46	16.5	126 10 0	3 4	2 15 0
Fordingbridge „	1	17	3 16 8	4 6	3 16 8
Lymington „	26	14	67 16 8	3 9	2 12 2
Petersfield „	12	12.75	26 10 0	3 6	2 4 2
Winchfield „	16	19.5	52 0 0	3 4	3 5 0
Winchester „	53	13.6	120 0 0	3 4	2 5 3
TOTALS AND AVERAGES	418	18.8	2624 12 1	6 8	6 5 7

Total Cost £2,624 12s. 1d. Total repayments £597 9s. 4d. Net Cost to County Council £2,027 2s. 9d.

Institutional Arrangements for Unmarried Mothers.

The arrangements with the Mothers' Hostel, Waltham House, Epsom, have been continued.

In 1930 four cases were admitted, in 1931 one, in 1932 two, in 1933 two, and in 1935 one.

It has been the practice for the mother and baby to go to Waltham House as soon as convenient after the confinement has taken place, but the Voluntary Committee which made this provision in 1932, arranged for confinements to take place at a Maternity Home in the neighbourhood and girls can now be received in the Hostel before the confinement and be sent to the Maternity Home when the time comes. There is no additional charge because of confinement expenses and the arrangement appears to be a satisfactory one. Five cases were admitted in 1932, three cases in 1933, four cases were admitted in 1934, and four cases in 1935, the average length of stay being five and a half months.

My attention was called to an Institution in Portsmouth for dealing with cases of this kind: it is called the Portsmouth and District Free Church Council Home and is situated at 22, Albany Road, Southsea. The charge there is at the rate of 7s. a week and the Governors of the Institution prefer that girls should be admitted about six weeks before the confinement is expected. Arrangements are made for the confinement to take place in St. Mary's Hospital, Portsmouth, at a charge of £2 12 6 a week with an additional payment of 5s. for the ambulance if required.

The girl returns to the Home after the confinement and remains there at least 4 months for training, etc.

Two such cases were admitted in 1934, the average length of stay being 7 months. One case was admitted in November, 1935 and is still in the Home.

Other institutional accommodation for unmarried mothers is provided by the Winchester Diocesan Society Maternity Home, North Walls, Winchester, as reported in 1930. Thirteen cases were dealt with during the year 1935. During the year 1934-1935 a contribution of £551 was made by the County Council in respect of the services provided by this home.

NURSING HOMES.

On the 31st December, 1935, 48 Nursing Homes receiving maternity cases were registered.

These homes dealt with 492 cases in the year ended the 31st December, 1935, but the six under-mentioned homes were open for less than 12 months.

Nursing Home.	Length of time open at 31st December, 1935.	
Windyridge, Barton Lane, Barton-on-Sea	7 months.
St. Catherine's, The Grove, Christchurch	11 ..
Woodlands, Long Copse, Fawley	7 ..
Shedfield Nursing Home, Shirrell Heath, Shedfield	8 ..
62, West Street, Titchfield	6 ..
Meadow View, Winchester	1 month.
The accommodation varies from 1 to 14 beds.		

Fourteen Homes were authorised to deal with one case at a time, 14 were authorised to deal with two cases at a time, and the remainder were able to take more than two cases at one time.

The number of cases dealt with varied from 1 to 81.

The areas in which the Homes are situated are as follows:—Aldershot, Alverstoke (2), Andover, Barton-on-Sea, Basingstoke, Blackwater, Botley, Brockenhurst, Chandlers Ford (2), Christchurch (2), East Boldre, Eastleigh, Emsworth, Fareham (2), Farnborough, Fawley, Four Marks, Gosport (2), Grayshott, Hartley Wintney (2), Havant, Heckfield, Highcliffe, Lymington, Milford-on-Sea, New Milton, Portmore, Ringwood, Shedfield, Sheet, Titchfield, Totton (3), Waterlooville and Winchester (7).

The under-mentioned Homes were open on the 1st January, 1935, but were closed during the year.

Nursing Home.	Closed down.
55, Victoria Road, Aldershot	August, 1935.
Springfield, 13 Bury Road, Alverstoke	October, 1935.
Lyss, 27, Dunmow Road, Andover	January, 1935.
Oaklands, Fawley	May, 1935.
Craighton, Tower Hill, Farnborough	May, 1935.
Bussana, Barton Court Avenue, New Milton	February, 1935.
Haughley, Forest Road, Swanmore	April, 1935.
3, Clifton Terrace, Winchester	June, 1935.

Maternal Mortality.

The Registrar General allocates the death of 39 women as a result of pregnancy, or connected therewith, to this County for 1935. This gives a maternal mortality rate of 5.07 per thousand total births.

Twenty-eight of these deaths have been investigated.

The Registrar General has again kindly provided me with details of all deaths included as maternal and allocated to this County. There were in 1935 eleven deaths which were not investigated since all but two took place outside the administrative County. These have been allocated to the groups in which they, from information given, should be included in the Table following:—

	1935	1934
Sepsis following normal labour	7	10
„ abnormal labour	4	2
Hæmorrhage—ante-partum	2	1
—post-partum	4	1
Toxæmia—eclampsia	2	2
—other	1	1
Obstetric shock following difficult labour	4	3
„ normal labour	2	1
Accidents of labour—ruptured uterus	3	1
—inversion of uterus	—	—
Pulmonary embolism	2	2
Ectopic gestation	2	1
Abortion—septic	1	5
—non-septic	1	2
Anæsthesia	—	1
Associated condition	4	2
Total	39	35
Total investigated	28	28

I have again scrutinized carefully the reports made as a result of investigation and include some notes on certain of the groups in the above Table.

Sepsis following Normal Labour.

Six of these women were known not to have had difficult labours and the seventh is presumed not to have since it was not mentioned; this last case was not investigated. Two of the six women had poor health and refused treatment before labour and the notes of the investigation read:—

Case 1. Always anaemic. Declined ante-natal examination. House dirty. This woman had a sudden onset of her disease and died very rapidly of acute pyosalpingitis and general peritonitis.

Case 2. Pale and anaemic. Doctor advised treatment but patient refused and also refused to attend Ante-natal Clinic. Had tonsillitis three weeks before confinement followed by albuminuria which was treated at home. Delivered of twins. Sepsis started on second day of puerperium due to staphylococcal infection.

Of the other four women who died of sepsis following normal labour, one had a precipitate labour with no doctor or midwife in attendance (she had no medical ante-natal care), while the other three had good ante-natal care from doctor and midwife, had good health but developed sepsis for which no explanation was found.

Sepsis following Abnormal Labour.

In this group this year are three deaths so attributed by the Registrar General and investigated; I have added one more from the Registrar General's returns which shows that death was due to general peritonitis following Caesarean section in Hospital for a complicated breech presentation. One of the three investigated cases only can be classed as abnormal labour because owing to tired condition of patient after a slow first stage, forceps were applied; there was no medical ante-natal care but no difficulty in delivery. The patient was not admitted to Hospital. The other two cases had good ante-natal medical supervision but had long labours, terminated in the one case by difficult forceps after a consultant had been called in, and in the other by spontaneous delivery after forceps had failed. In neither case was the patient admitted to Hospital until the sepsis developed.

Toxaemia.

Of the two cases of eclampsia the first refused to have medical ante-natal care. She had a difficult labour terminated by Caesarean section in Hospital after forceps had failed outside and developed fits four days later from which she died. The second was a doctor's case and had every care. The woman, who died from the other form of toxaemia, had no ante-natal care and had made no arrangements for confinement. She called in a doctor for vomiting. After treatment at home for two days with no improvement, she was admitted to Hospital but after spontaneous delivery of a stillborn child died in a coma.

Obstetric Shock due to Difficult Labour.

Four deaths are attributed to this cause. In two of these the labour could not be called difficult except for the fact that the placenta was adherent and the fatal shock was due to attempts at manual removal. The other two were doctors' cases, both known to have contracted pelvis and admitted to Hospital without outside interference; death occurred after Caesarean section in one case and insertion of tube for induction in the other.

Haemorrhage—Ante-partum.

Only one of these cases was investigated. This was a case of sudden and massive haemorrhage with no warning.

Haemorrhage—Post-partum.

In one of these cases the haemorrhage was not definitely considered the cause of death but since there was no post-mortem a more reliable diagnosis could not be made; it was the eleventh pregnancy. In one case there was a sudden onset of intense albuminuria with a twin pregnancy and the haemorrhage followed induction of labour; in one of the other two there was a partially adherent placenta and delay in obtaining medical assistance owing to the isolated situation of the home, and lastly a miscarriage at 28 weeks in a woman who had had several previous miscarriages. From the treatment given there seems to have been no possibility of preventing these deaths.

Accidents of Labour, etc.

None of these three cases of ruptured uterus was investigated, nor the two cases of Ectopic Gestation.

The four deaths from *Associated Conditions* were due to Pneumonia following a normal confinement in two cases, acute pyelitis followed by miscarriage at 28 weeks and septicæmia following abcess of breast.

From this review it is seen that preventive measures are very difficult to make effective and that the essential co-operation of the patient is not always obtained. It has been suggested that inco-ordinated action of involuntary muscles due to "nervousness" is a contributing factor to the risks of childbirth in modern times and there appears to be some ground for this suggestion. I do not know how far this might explain ectopic gestation or uterine rupture but apart from these five deaths there has been of late years an increase in deaths from post-partum hæmorrhage and obstetric shock and not after particularly difficult labours.

Puerperal Fever and Puerperal Pyrexia.

During the year 1935, 14 cases of puerperal fever and 84 cases of puerperal pyrexia were notified; 11 cases of puerperal fever and 52 of pyrexia occurred in the practice of midwives. As a result of investigations carried out by the Inspector of Midwives into the last group of cases, the causes of the pyrexia appeared to be:—

Uterine sepsis	...	...	...	...	...	...	...	...	20
Other forms of sepsis connected with confinement such as pelvic cellulitis, phlebitis, etc.	...	...	...	...	...	...	...	...	5
Diseases of respiratory system	...	...	...	...	...	...	...	...	4
Pneumonia	...	...	...	...	...	...	1	...	
Bronchitis	...	...	...	...	...	...	3	...	
Mastitis and congestion of breast	...	...	...	...	...	...	...	...	5
Diseases of urinary tract	...	...	...	...	...	...	...	...	4
Enteritis	...	...	...	...	...	...	...	...	2
Appendicitis, Influenza, Measles (1 each)	...	...	...	...	...	...	...	...	3
Unknown but not septic	...	...	...	...	...	...	...	...	9

The arrangements made under the Order of the Ministry of Health, 1926, were continued and during the year:—

(i) The services of an approved consultant were asked for in 6 cases of puerperal pyrexia and 2 cases of puerperal fever; 4 of these cases were admitted to hospital.

(ii) 8 specimens of lochia were received.

(iii) 25 cases notified as Puerperal Pyrexia and 7 cases of Puerperal Fever were admitted to hospital.

(iv) The services of the County Council Health Visitor were asked for and provided in one case.

So that there should be equipment quite ready at short notice, two outfits have been provided and these are kept in a hamper at the head office ready for immediate despatch by train. The outfit consists of:—Higginson's syringe, 2 glass nozzles, clinical thermometer, bath thermometer, rubber catheter, 1 pair rubber gloves, douche can, enamel jug, basin and 2 dishes, bedpan, soap, lysol, 1 mackintosh sheet, 2 hand towels, 2 glass towels, rubber tubing with tap, and nailbrush.

Anti-streptococcal serum is supplied where considered necessary by the general practitioner under the provisions of the Maternity and Child Welfare Act, 1918.

Arrangements are made for the admission of septic cases to the following Hospitals:—

Farnham Public Assistance Institution.
 Gosport War Memorial Hospital.
 Queen Charlotte's Hospital, Hammersmith.
 Royal Hants County Hospital, Winchester.
 Salisbury General Infirmary.
 Royal Victoria and West Hants Hospital, Boscombe.

29 cases were admitted in 1935.

Other emergencies arising during labour or lying-in.

The Council has made arrangements for the same consultants as are available in cases of puerperal sepsis to be called in where other emergencies arise during labour or lying-in.

During the year a consultant was called in in five cases of difficult labour, one case of placenta prævia, two cases of disproportion and one case of pre-eclampsia.

Stillbirth.

During the year 1935, 263 stillbirths were registered; this includes transfers from areas outside the County. Cases occurring in a midwife's practice are, as far as possible, investigated by the Inspector of Midwives.

During the year, 122 stillbirths occurring in the practice of midwives were investigated; of these 61 were macerated, 59 fresh and in 2 the condition was not noted. The causes appeared to be as follows:—

					Macerated.		Fresh.
Complications of labour	...	...	...	...	1	...	20
Ante-partum hæmorrhage	...	...	...	...	2	...	7
Toxæmia of pregnancy	...	...	...	...	7	...	0
Syphilis	...	...	...	...	0	...	0
Maternal state	...	...	...	...	4	...	2
Placental state	...	...	...	...	0	...	0
Fœtal state	...	...	...	...	11	...	17
Prematurity	...	...	...	...	2	...	5
Unknown	...	...	...	...	34	...	8

Of the 59 fresh foetuses the cause of death was attributed to:—

Complications of labour	...	...	...	...	...	...	20
Breech (including footling)	...	...	...	...	...	6	
Difficult vertex	...	...	...	...	...	13	
Precipitate labour	...	...	...	...	...	1	
Ante-partum hæmorrhage	...	...	...	...	...	...	7
Toxæmia of pregnancy	...	...	...	...	...	...	0
Maternal state	...	...	...	...	...	...	2
Fœtal state	...	...	...	...	...	...	17
Deformities	...	...	...	...	...	7	
Twins	...	...	...	...	...	2	
Knotted or twisted cord	...	...	...	...	...	6	
Unruptured membranes	...	...	...	...	...	2	
Prematurity	...	...	...	...	...	...	5
Unknown	...	...	...	...	...	...	8

With regard to fresh stillbirths the following notes may be added.

Complications of Labour.

Of the 20 cases 15 were stated to have had medical ante-natal care, either privately or under the Council's Scheme, and 5 had none; all difficult vertex cases.

Fœtal States.

These included 7 deformities, 3 of which were anencephaly, 3 spina bifida with or without other complication such as hydrocephalus and 1 a monster.

Maternal States.

In both cases the mother had broncho-pneumonia from which she died.

Comparison with previous years is made in the following table:—

	1930	1931	1932	1933	1934	1935
Complications of labour	31	30	31	24	18	20
Ante-partum hæmorrhage	1	5	2	2	1	7
Toxæmia of pregnancy	4	4	2	1	2	—
Maternal state	—	3	—	—	—	2
Placental state	—	—	—	—	4	—
Foetal state	18	14	12	7	20	17
Prematurity	5	5	2	2	1	5
Unknown	9	5	6	9	13	8
Total investigated	68	66	55	45	59	59

The percentage of fresh stillbirths which were investigated and apparently caused by complications of labour and toxæmia, i.e., by conditions amenable to ante-natal care has been:—

	1930	1931	1932	1933	1934	1935
Complications of labour	46	45	56	53	31	34
Toxæmia	6	6	4	2	3	—

Percentage of total stillbirths (macerated and fresh) due to Ante-partum Hæmorrhage and Toxæmia.

	1930	1931	1932	1933	1934	1935
Ante-partum hæmorrhage	2	4	3	6	2	7
Toxæmia	4	4	6	4	6	6

These figures appear to indicate some measure of progress in the prevention of stillbirth due to complications of labour, but little change in the incidence of stillbirth due to toxæmia, with perhaps an irregular tendency to increase in ante-partum hæmorrhage.

Resuscitation of apparently stillborn infants.

In 1933 it was noticed that the proportion of infant deaths attributed to congenital debility amounted to 63.7 per cent. of all deaths under the age of twelve months. In view of the opinions expressed in the reports published by the Medical Research Council in 1926 and 1930 that the causes of neonatal death and stillbirth are closely linked and that in many cases atelectasis giving rise to asphyxia and inadequately treated was the main factor, the following instructions were issued to midwives:—

1. Always wipe out the mouth as soon as it appears on the perineum to prevent the child breathing in mucus.

2. *Cases of blue asphyxia.* Hold the child face downwards to allow mucus or blood to drop out of the mouth and then lay on to side. If respiration and crying do not quickly improve push the rubber catheter right back into the pharynx and suck it out several times.
3. *White asphyxia.* Treat for shock by quiet, warmth and minimum of interference. Suck out mucus from pharynx as for blue asphyxia. Administer carbon dioxide from a Sparklet in a gentle stream through a rubber nasal catheter greased with vaseline.

The Inspector of Midwives was asked at the end of July to make a special point of instructing each midwife personally as soon as she could get round. Every midwife inspected between October and December has been instructed in the methods of resuscitation.

Four District Nursing Associations are discussing the question of the provision of a Sparklet apparatus. In one case the District Nurse had already purchased her own.

Ophthalmia Neonatorum.

The arrangements made with a view to prevention and treatment of this condition have been described in previous reports and have continued to work satisfactorily.

During the year 1935 notifications were received in respect of 64 cases of ophthalmia; of these 16 were doctors' cases and 48 midwives'. Of this number 10 were nursed at home by the Health Visitors. No cases were admitted to Hospital.

Of the 48 midwives' cases reports have been received from the Inspector of Midwives which give the following information :—

Date of Onset of discharge from eyes.

7 days or less after birth	...	...	23 cases
8-14 days after birth	...	...	17 "
More than 14 days after birth	...	...	8 "

Medical Examination had been carried out ante-natally in 27 cases but vaginal discharge noted in 2 only. Of these the cause was found in one to be gonococcal in origin and appropriate treatment undertaken before labour.

Smears were taken from the eye discharge in 43 cases and showed no evidence of gonococcal infection except in the case to which reference was made above.

An investigation has been made into the after histories of cases notified as ophthalmia neonatorum with the following results :—

Year	No. notified	Eyes normal	One eye blind	Both eyes blind	Dead, left district, etc.	One eye partially blind, squint
1929	63	54	1	2	6	—
1930	57	50	—	—	7	—
1931	36	35	—	—	1	—
1932	60	50	5	1	1	3
1933	61	61	—	—	—	—
1934	62	56	1	—	5	—
1935	64	60	—	—	4	—

(b) Child Welfare.

The absolute necessity for obtaining early information of the births of infants to enable adequate supervision of their health to be instituted as early as possible makes the satisfactory carrying out of the regulations of the Notification of Births Acts of fundamental importance.

Notification of Births.

The County Council is the local authority for the purpose of the Notification of Births Act for the whole area, with the exception of the City of Winchester and the Borough of Aldershot.

Notifications Received.

YEAR	BORN LIVING			BORN DEAD			GRAND TOTALS		
	Male	Female	Total	Male	Female	Total	Male	Female	TOTAL
1931	3117	2992	6109	117	90	207	3234	3082	6316
1932	3118	2943	6061	101	85	186	3219	3028	6247
1933	2835	2840	5675	97	74	171	2932	2914	5846
1934	2944	2783	5727	98	75	173	3042	2858	5900
1935	2908	2779	5687	96	91	187	3004	2870	5874

Failures to Notify.

Year.			Total.	Attended by Doctor.		Attended by Midwife.	
1931	...	...	60	...	50	...	10
1932	...	...	42	...	35	...	7
1933	...	...	61	...	49	...	12
1934	...	...	44	...	37	...	7
1935	...	...	48	...	39	...	9

At the end of every month a list of births notified in his district is sent to the Registrar of every registration district in the County with a request that he be good enough to check this list with the births registered by him during the same period and to send me information of any birth which has been registered but not notified. On receipt of such information a letter is sent to the father of the child whose attention is called to the law and who is asked to give the name of the doctor or midwife who attended his wife. The attention of the doctor or the midwife concerned is then drawn to the requirements of the Notification of Births Acts. It will be seen that 48 births were not notified ; this number represents .81 per cent. of all births.

All doctors and midwives in the County are supplied by the County Medical Officer with cards on which they are required to notify births attended by them. When a notification is received of a birth attended by a midwife the case is visited as soon after the midwife ceases attending as can be arranged in conjunction with the Health Visitor's other work, and advice is given to the mother as to how to take care of her child. A pamphlet on the subject written by the County Medical Officer, is supplied in each case visited. These visits are greatly appreciated, not only by most mothers, but by the majority of midwives also.

In the case of births attended by doctors the Health Visitor exercises her discretion, regard being had to the apparent circumstances of the family as to whether a visit is necessary or not. It is obvious in some cases that advice should not be required whilst in others it is equally obvious that a Health Visitor can be of considerable assistance.

The Health Visitor continues to pay visits to give advice and help until the child is of school age. During the year 1935, 107,328 such visits were made including :—

To children under 1 year of age—first visits 6,439, total visits	39,363
To children between the ages of 1 and 5, total visits	67,965

The importance of an early visit by the Health Visitor is stressed, but care is taken to avoid overlapping with the midwife in charge of the case. During the first twelve months of the baby's life the Health Visitor sees the child once a month as far as practicable and more often when the circumstances seem to require it. The arrangements made with regard to the supervision of children born in barracks were detailed in the report for 1930.

Breast Feeding of Infants.

I am unable to record any improvement in the amount of breast feeding carried out in the County ; the percentage of infants born in the first six months of 1935 breast fed up to six months was 63, i.e., 1,586 out of 2,520. The worst areas in this respect were those bordering Southampton Water on either side, the neighbourhood of New Milton, the outskirts of Gosport and the towns of Eastleigh and Fareham.

Supply of Extra Nourishment.

During the year 1935 milk was supplied to 205 nursing mothers and 545 children under five years of age.

Food other than milk was allowed as follows:—

	Children under 5.	Nursing Mothers.
Cod liver oil and malt ...	47	1
Cod liver oil ...	5	—
Cod liver oil emulsion ...	6	—
Maltoline ...	2	—
Eggs ...	16	6
Cow and Gate food ...	1	—
Ambrosia ...	1	—
Ostermilk ...	2	—
Virol ...	3	—
	<hr/> 83	<hr/> 7

28 cases were recommended for extra nourishment which was not granted. In 14 cases the financial circumstances were above the scale, 11 cases did not wish to apply, 1 left the district, 1 recommendation was in respect of a foster child and the foster mother provided the extra nourishment and the other recommendation was for a mother who was neither expectant nor breast feeding an infant and, therefore, the milk was not provided.

Child Welfare Centres.

The following table shows the situation, times of opening and alterations with regard to the Centres in operation at the present time.

The use of such Centres in addition to home visits by the Health Visitor is undoubted. The total number of children who attended for the first time during the year was:—

Children under one year of age	...	...	...	2654	(2475)
Children between 1 and 5 years	...	...	...	1351	(1218)
The percentage of total notified live births being	...	...	...	70	(64)

The total number of attendances at all Centres during the year was:—

Children under one year of age	...	...	27639	(26158)
Children between 1 and 5 years	...	...	44749	(42290)

During the year 1935, 504 addresses were given by Medical Officers, 63 by County Dental Officers, 251 by Health Visitors, and 45 by Voluntary Workers, dealing with a large variety of subjects as in former years.

The supervision of "toddlers" at the Welfare Centres is much to be desired but difficult to obtain for various reasons. Home visits, as previously mentioned, have been largely increased to children at these ages.

Owing to the rather large number of children attending at Ringwood Infant Welfare Centre a special arrangement has been made for an extra clinic to be held on the first Wednesday afternoon in each quarter for the examination of "toddlers" only.

CENTRE	WHERE HELD	WHEN HELD All meetings commence at 2.30 p.m. unless otherwise stated	MEDICAL OFFICER	Number of New Cases				Total Attendances				All Children	Total Number of Sessions	Average Attendance per Session		Lectures given by	
				Expectant Mothers	Under one year	One to two years	2-5 years	Expectant and other Mothers	Under one year	One to two years	2-5 years			Mothers	Children	Medical Officer	Health Visitor
Alresford ...	Town Hall	Third Thursday in month at 2 p.m.	Dr. Hughes	—	26	7	6	236	139	66	112	317	11	21	29	1	—
Alton ...	Assembly Rooms	Second and Fourth Tuesdays	Dr. Shed.	—	37	4	29	387	236	78	194	508	22	18	23	6	—
Amport ...	Amport Hut	First Monday in month	Dr. Simpson	—	7	—	2	141	66	59	66	191	10	14	19	9	—
Andover ...	Old Cottage Hospital, Junction Road	Every Thursday	Dr. Simpson	—	110	10	17	3663	1894	630	1953	4477	44	83	102	—	—
Appleshaw ...	Church Hall	Third Wednesday in month	Dr. Simpson	—	8	4	4	159	61	50	134	245	11	14	22	9	—
Basing ...	Village Hall	First Tuesday in month	Dr. Avent	1	16	3	4	224	79	98	74	251	11	20	23	9	—
Basingstoke ...	Church Cottage, Church Square	Every Friday	Dr. Kelf	—	104	9	37	1568	973	322	742	2037	50	31	41	24	2
Bishops Waltham ...	The Institute	First Friday in month	*Dr. W. D. Mitchell	2	32	9	17	294	163	98	93	354	12	25	30	3	2
Boldre ...	Thanksgiving Hall	First and Third Tuesdays in month	Dr. Cockayne	—	4	—	1	208	28	72	135	235	20	10	12	10	—
Botley ... (1)	Market Hall	Second and Fourth Wednesdays	*Dr. A. S. Pern	—	29	10	2	856	548	365	291	1204	23	37	52	—	—
Breamore ...	Hulse Hall	Second Wednesday in month	Dr. Morrell	—	11	5	8	194	64	68	124	256	12	16	21	9	—
Brockenhurst ...	Morant Hall	First and Third Tuesdays	*Dr. C. A. Dottridge	—	12	—	2	432	167	86	274	527	21	21	25	—	7
Broughton ...	Village Hall	First Wednesday in month	Dr. Tate	—	10	1	1	111	31	24	71	126	9	12	14	4	—

(1) Second Thursday as from September, and Dr. Cockayne as from April.

Buriton ... (Closed December 1935)	Women's Institute Room	Third Friday in month	Dr. MacIver	—	8	—	2	86	35	27	67	129	10	9	13	—	—
Bursledon ...	Parish Hall	Third Friday	Dr. Druitt	—	29	—	4	290	147	85	115	347	11	26	32	—	—
Chandlersford ...	Ritchie Hall	First and Third Tuesdays in month (2 p.m.)	Dr. Tate	—	28	9	8	434	250	162	127	539	21	21	26	—	—
Cheriton ...	Parish Hall	First Friday in month	Dr. Hughes	—	17	—	5	158	94	48	84	226	11	14	21	3	—
Chilbolton ...	Village Hall	Second Monday in month	Dr. Simpson	—	6	—	—	180	73	38	160	271	11	16	25	9	—
Christchurch ...	C.C. Health Centre, Millham's Street	Every Tuesday	Dr. Morrell	3	80	13	24	2285	1029	624	1172	2825	47	49	60	4	1
(2) Colden Common	Parish Hall	Fourth Monday in month	Dr. Hughes	—	17	2	5	185	76	40	98	214	11	17	19	2	—
Copythorne ...	Comrades' Hut, Cadnam	Second and Fourth Thursdays in month	Dr. Cockayne	—	12	7	10	419	200	200	202	602	19	22	32	7	6
(3) Cove ...	St. Christopher's Church Room	Every Thursday	Dr. Lloyd	1	18	6	6	1468	607	239	1096	1933	44	33	44	8	7
Denmead ...	Church Room	Second and Fourth Wednesdays in month	Dr. Shed	1	7	5	6	216	104	86	141	331	19	11	17	9	6
Droxford ...	Village Hall	First Friday in month	Dr. Shed	—	12	2	5	130	48	35	80	163	11	12	15	9	—
East Boldre ...	Parish Hall	Second Monday in month	Dr. Cockayne	—	7	—	3	189	58	66	88	212	11	17	19	9	1
Eastleigh ...	C.C. Health Centre	Every Wednesday (at 2 p.m.)	Dr. Hughes	—	129	33	72	2748	1405	897	950	3252	47	58	69	—	—
Emsworth ...	Parish Room	First and Third Thursdays in month (at 3 p.m.)	*Dr. R. M. Soames	—	26	—	3	668	283	128	313	724	20	33	36	9	9
Eversley ...	Scouts' Hut	First Tuesday in month	*Dr. E. Billing	—	12	2	1	195	83	81	76	240	11	18	22	5	—

(2) Third Friday as from May.
(3) Dr. Shed as from September.

CENTRE	WHERE HELD	WHEN HELD All meetings commence at 2.30 p.m., unless otherwise stated	MEDICAL OFFICER	Number of New Cases				Total Attendances				All Children	Total Number of Sessions	Average Attendance per Session		Lectures given by	
				Expectant Mothers	Under one year	One to two years	2-5 years	Expectant and other Mothers	Under one year	One to two years	2-5 years			Mothers	Children	Medical Officer	Health Visitor
Fair Oak ...	Women's Hall	First Tuesday in month	Dr. Hughes	—	26	3	22	260	96	51	224	371	11	24	34	6	—
(4) Fareham ...	Parish Hall	Second, Third and Fourth Fridays in month	Dr. McMath	—	70	6	9	1232	603	392	569	1564	35	35	45	2	7
Farnborough ...	St. Martin's Club Rooms	Every Tuesday	Dr. Lloyd	—	61	9	15	1338	681	362	465	1508	47	29	32	—	—
Farleigh Wallop... (Opened February 1935)	Club Room	First Thursday	*Dr. H. M. P. Hunt	5	7	8	17	153	32	45	91	169	11	14	15	10	1
Fawley ...	Village Hall	First Monday in month	Dr. Cockayne	—	24	2	7	373	144	133	163	440	10	37	44	6	—
Fleet ...	Church Institute	First and Third Thursdays	Dr. Avent	—	56	4	14	851	404	245	440	1089	22	39	50	—	—
Fordingbridge ...	Welfare Rooms	Every Friday	Dr. Morrell	—	20	6	2	651	199	235	294	728	45	14	16	1	—
(5) Forton ...	Crossways Hut	Alternate Wed.	Dr. Druitt	13	180	62	54	3043	2104	862	715	2851	36	85	79	—	3
Gosport ...	Nicholson Memorial Hall	Every Thursday	Dr. Druitt	—	150	11	25	3062	2096	615	800	3511	50	61	70	—	26
(6) Gosport St. Matthews (Opened January) Grayshott ...	St. Matthew's Parish Hall	Every Friday	*Dr. J. Mc- Cutcheon	15	77	18	24	2519	1434	799	793	3026	51	49	59	—	—
	Village Hall	Every Friday (at 2.45 p.m.)	*Dr. Sarah Gray	—	10	4	2	326	84	148	97	329	48	7	7	—	—
Hartley Wintney	Women's Institute Hut	First and Third Fridays in month	Dr. Avent	—	15	2	1	414	149	96	193	438	21	20	21	3	—
Hatherden ...	Billiard Room, Hatherden Manor	Fourth Tuesday in month	Dr. Simpson	—	1	—	1	74	24	21	49	94	9	8	10	7	1

(4) Held in Wesleyan Hall, West Street on the First, Second and Fourth Fridays in month.

(5) Held in St. John's Parish Room on every Wednesday as from July.

(6) Dr. Tibbles from October.

Havant ...	C.C. Health Centre	Second and Fourth Tuesdays in month	Dr. MacIver	—	23	2	14	466	219	107	235	561	22	21	25	5	4
Hayling ...	Y.M.C.A. Hut, Elm Grove	First and Third Wednesdays in month	Dr. MacIver	—	16	3	6	418	166	124	339	629	22	19	29	2	3
Headley ...	Village Hall	Every Friday	Dr. Shed	—	28	1	6	1186	490	402	753	1650	45	26	37	9	3
⁽⁷⁾ Hook ...	Band Hall	Fourth Tuesday	Dr. Avent	—	6	1	4	99	41	57	31	129	11	9	12	4	—
Hordle ...	Women's Institute Hall	Third Wednesday in month	Dr. Cockayne	—	7	5	4	173	76	101	50	227	11	16	21	10	1
Horndean (Opened May)	Parish Hall	Fourth Tuesday	*Dr. J. Way	—	46	21	30	161	92	46	67	205	6	27	34	1	1
Houghton ...	Club Room	Third Tuesday in month	Dr. Tate	—	3	—	—	57	11	23	46	80	11	5	7	8	2
Hurstbourne Priors	Village Hall	First Wednesday in month	Dr. Simpson	—	4	3	8	165	44	47	114	205	11	15	19	10	—
Hythe ...	St. John's Room	Second and Fourth Tuesdays in month	*Dr. E. H. Roberts	—	13	1	1	278	107	86	182	375	17	16	22	—	1
Itchen Abbas ...	Village Hall	Second Thursday in month	Dr. Hughes	—	4	—	1	163	42	44	137	223	11	15	20	4	—
Kingsclere ...	Village Club	Fourth Thursday in month	Dr. Kelf	—	14	1	2	366	161	80	277	518	11	33	47	5	—
Kings Somborne	Village Hall	Second and Fourth Tuesdays in month	Dr. Tate	—	8	2	—	336	119	97	205	421	20	17	21	8	8
⁽⁸⁾ Kings Worthy ...	Parish Hut	First Thursday in month	Dr. Hughes	—	8	2	7	148	62	31	89	182	11	13	17	5	—
Lee-on-Solent ...	Lowry Hut	First and Fourth Tuesdays in month	Dr. Druitt	—	15	2	1	358	126	132	180	438	21	17	21	5	8

⁽⁷⁾ Transferred to Village Hall, 22nd October.
⁽⁸⁾ Transferred to Easton Village Hall, 7th March. Returned to Kings Worthy Jubilee Hall, 5th December.

CENTRE	WHERE HELD	WHEN HELD All meetings commence at 2.30 p.m. unless otherwise stated	MEDICAL OFFICER	Number of New Cases				Total Attendances				All Children	Total Number of Sessions	Average Attendance per Session		Lectures given by	
				Expectant Mothers	Under one year	One to two years	2-5 years	Expectant and other Mothers	Under one year	One to two years	2-5 years			Mothers	Children	Medical Officer	Health Visitor
Liphook ...	Church Room	First and Third Tuesdays in month	Dr. Shed	—	24	3	8	641	249	202	484	935	22	29	43	3	1
Liss ...	British Legion Hall	First and Third Fridays in month	*Drs. Scott and Corry	—	24	8	6	432	256	210	120	586	20	22	29	—	11
Lockerley ...	Memorial Hall	Fourth Wednesday in month	Dr. Tate	—	10	2	—	110	46	9	96	151	11	10	14	—	—
Locks Heath (Closed May 1935)	Memorial Hut	Second and Fourth Thursdays	*Dr. J. R. Kingdon	—	8	—	—	107	79	44	37	160	10	11	16	1	8
Longparish ...	Village Hall	Second Wednesday in month	Dr. Simpson	—	6	—	1	119	35	23	89	147	11	11	13	8	—
Lymington ...	Literary Institute	Every Friday	Dr. Cockayne	—	45	3	9	1589	605	345	1230	2180	44	36	50	7	7
Lyndhurst ...	Church Room, Forest Gardens	Second and Fourth Wednesdays in month	*Dr. E. H. Sears	—	5	2	3	210	32	69	121	222	19	11	12	1	9
Marchwood ...	Church Room	First and Third Tuesdays in month	Dr. Cockayne	—	8	4	2	337	79	182	125	386	20	17	19	9	8
Mattingley ...	Women's Institute Hut	Third Tuesday in month	Dr. Avent	—	7	3	3	141	56	34	79	169	11	13	15	4	1
Micheldever ...	Northbrook Hall	Second Friday in month	Dr. Hughes	15	16	—	—	193	98	37	90	225	12	16	19	4	—
Milford-on-Sea ...	Church Hall	Third Thursday in month	Dr. Cockayne	3	16	5	3	247	133	73	117	323	11	22	29	9	2
Millbrook ...	Recreation Room	Second and Fourth Tuesdays in month	Dr. Tate	—	9	3	1	368	100	220	62	382	21	18	18	—	4
Mottisfont ...	Parish Room	First and Third Thursdays in month	Dr. Tate	—	9	—	2	222	98	62	169	329	22	10	15	2	12
Netley ...	Legion Hut	Second Wednesday in month	Dr. Drutt	11	31	3	5	468	287	198	174	659	11	43	60	—	1

MATERNITY AND CHILD WELFARE

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New Milton	...	Institute	Second and Fourth Tuesdays in month (at 2 p.m.)	Dr. Cockayne	—	35	6	13	471	284	103	208	595	20	24	30	8	5
North Baddesley	...	Symes Memorial Hall	First and Third Fridays	Dr. Tate	1	19	4	11	395	164	129	200	493	21	19	23	—	—
North Waltham	...	Rectory Club Room	Third Thursday in month (2.15 p.m.)	Dr. Kelf	—	9	5	1	160	79	59	132	270	12	13	22	7	—
Oakley (Closed December 1935)	...	Parish Hall	Fourth Wednesday in month	Dr. Kelf	—	4	2	2	76	24	15	57	96	9	8	11	9	—
Odiham	...	The Hut, Dunley's Hill	Second and Fourth Fridays in month	Dr. Avent	—	17	—	—	242	138	99	88	325	22	11	15	—	11
Overton	...	St. Mary's Hall	First Friday in month (at 2 p.m.)	Dr. Kelf	—	23	4	10	395	139	117	250	506	10	39	51	2	—
Over Wallop	...	Church Room	Fourth Wednesday in month	Dr. Simpson	—	13	1	1	135	57	43	73	173	11	12	16	7	1
Owslebury	...	Village Hall	Second Tuesday in month	Dr. Hughes	—	3	2	—	60	23	31	41	95	10	6	9	5	—
Pennington	...	Women's Institute	Second and Fourth Tuesdays in month	Dr. Cockayne	—	17	1	1	362	128	108	234	470	20	18	23	8	10
Petersfield	...	Ramshill	Every Wednesday	*Dr. R. Campbell- Cooke	—	50	4	18	1673	646	537	1013	2196	46	36	48	—	—
Portchester	...	Parish Room	First and Third Wednesdays	Dr. McMath	4	19	6	10	366	112	111	241	464	22	17	21	9	3
Preston Candover	...	Village Hall	Second Thursday in month	Dr. Shed	1	11	2	2	130	48	34	61	143	11	12	13	8	—
Purbrook	...	Deverell Hall	First and Third Tuesdays in month	Dr. MacIver	—	26	5	18	668	234	155	431	820	22	30	37	2	5
(9) Ringwood	...	Conway Hall	First and Third Wednesdays in month	Dr. Morrell	—	36	7	18	719	294	200	487	981	21	34	47	1	1
Romsey	...	Abbey Hall	Every Thursday	Dr. Tate	—	43	9	20	1441	654	402	940	1996	45	32	44	—	—

(9) Held on Second and Fourth Wednesdays as from September.

CENTRE	WHERE HELD	WHEN HELD All meetings commence at 2.30 p.m. unless otherwise stated	MEDICAL OFFICER	Number of New Cases				Total Attendances				All Children	Total Number of Sessions	Average Attendance per Session		Lectures given by	
				Expectant Mothers	Under one year	One to two years	2-5 years	Expectant and other Mothers	Under one year	One to two years	2-5 years			Mothers	Children	Medical Officer	Health Visitor
Rowlands Castle	Parish Hall	Second Friday in month	Dr. MacIver	—	20	—	5	169	92	55	75	222	11	15	20	2	3
Selborne ...	Village Hall	Second Wednesday	Dr. Shed	—	7	—	2	150	65	73	85	223	11	14	20	5	3
St. Marybourne	Parish Room	Second Thursday in month	Dr. Simpson	—	16	1	3	210	124	32	126	282	10	21	28	4	—
Shedfield ...	Chase Hut	Second and Fourth Tuesdays in month	Dr. Druitt	—	16	3	8	229	110	67	121	298	22	10	14	14	2
Southwick	Play Hut	Third Friday in month	Dr. McMath	—	2	—	—	123	21	16	118	155	11	11	14	7	—
Stockbridge	Town Hall	Third Tuesday in month	Dr. Simpson	—	8	—	4	218	87	66	156	309	11	20	28	10	—
Stubbington	Reading Room	Second and Fourth Wednesdays in month	Dr. McMath	—	32	3	8	425	283	102	151	536	23	18	23	2	10
Sutton Scotney ...	Jubilee Hall	Third Friday in month (2 p.m.)	*Dr. C. Farrant	—	6	2	1	148	45	42	84	171	10	15	17	—	3
Sway ...	Women's Institute Hall	First Thursday in month	Dr. Cockayne	1	14	—	3	281	92	82	198	372	11	26	34	7	—
Tadley ...	Church Room	First Wednesday in month	Dr. Kelf	—	25	2	6	292	153	84	176	413	11	27	38	9	—
Titchfield ...	Parish Room	First and Third Mondays	Dr. Druitt	2	27	4	23	341	157	84	274	515	19	18	27	2	6
Totton ...	C.C. Health Centre	Every Friday	Dr. Cockayne	1	100	23	29	2070	1338	567	546	2451	45	46	54	3	1
Upper Clatford ...	The School	First Tuesday in month	Dr. Simpson	—	8	2	2	202	76	43	146	265	11	18	24	10	—

Upton Grey	...	Village Hall	First Wednesday in month	Dr. Shed	1	9	—	8	98	37	24	63	124	11	9	11	8	—
Vernham Dean	...	Village Hall	Third Tuesday in month	*Dr. M. Savory	—	8	1	—	95	41	34	58	133	12	8	11	8	1
Waterlooville	...	St. George's Hall	Second and Fourth Fridays in month	Dr. MacIver	—	22	4	10	754	277	229	589	1095	21	36	52	1	4
West End	...	Parish Room	First and Third Wednesdays	Dr. Druitt	—	18	3	5	626	169	171	311	651	22	28	30	—	4
Weyhill	...	Reading Room	Second Tuesday in month	Dr. Simpson	—	8	2	3	145	39	18	122	179	11	13	16	9	—
Whitchurch	...	Church Hall	Second Friday in month	Dr. Kelf	—	16	1	12	292	130	126	156	412	10	29	41	3	—
Whitehill	...	Village Hall	First and Third Thursdays in month	Dr. Shed	3	8	6	4	475	153	217	285	655	22	22	30	10	3
Woolton Hill	...	Church Hall	Third Wednesday in month	Dr. Kelf	9	19	9	3	477	130	171	299	600	11	43	55	7	—
Yateley	...	Parish Hall	Second Tuesday in month	Dr. Avent	—	16	1	2	213	96	60	159	315	11	19	29	10	1
TOTAL ...					93	2654	481	870	57304	27639	16367	28382	71550	2070	22	35	514	251

* General Practitioner.

Lectures on Food Values.

The National Milk Publicity Council agreed to give some lectures on food values in 1934. The series was carried on during the year 1935 and the lectures during that year were given at the following Centres:—

Boldre.	Emsworth.	Netley.
Botley.	Fawley.	North Waltham.
Breamore.	Hythe.	Over Wallop.
Brockenhurst,	Itchen Abbas.	Ringwood.
Christchurch.	Kingsclere.	Rowlands Castle.
Copythorne.	Liphook.	Sway.
Denmead.	Lymington.	Totton.
East Boldre.	Lyndhurst.	Waterlooville.
Eastleigh.	Marchwood.	Whitchurch.

Cooking Demonstrations.

At a subsequent date it was agreed with the National Milk Publicity Council that some cooking demonstrations might follow up the above lectures and these demonstrations were given during 1935 at the following Centres.

Christchurch.	Lymington.
Fareham.	North Baddesley.
Fordingbridge.	Overton.
Gosport St. Matthews.	

Infant Life Protection.

During the year 1935, 245 notices of reception were received from foster mothers and on the 31st December there were known to be 212 foster mothers and 295 foster children in the County, the cases being distributed as follows:—

169	foster mothers each had one child ...	...	=	169	children
29	„ „ „ „ two children	...	=	58	„
7	„ „ „ „ three „	...	=	21	„
3	„ „ „ „ four „	...	=	12	„
2	„ „ „ „ six „	...	=	12	„
1	foster mother had eleven children	...	=	11	„
1	„ „ „ „ twelve „	...	=	12	„
212				295	

During the same period the deaths of three foster children were notified. Two were certified as being due to natural causes and one died from cerebral hæmorrhage as the result of a fall.

Many applications for foster children are received and these are promptly investigated so that, if suitable, approval may be given. At the present time there are many cases of women wishing to receive children for reward; some of these women are already foster parents or have previously had a child in their care.

Treatment of Defects in Children under the age of 5 years.

Similar arrangements are made to treat defects occurring in children under the age of 5 years as for those in school children.

Tonsils and Adenoids.

During the year 23 (24) children under the age of 5 years were operated upon at a nett cost to the County Council of £23 7s. 6d. (£35 13s. 6d.); the figures in brackets refer to 1934.

Defective Vision.

These cases are mostly cases of squint as the prevention of blindness arising from this makes the requisite treatment urgent. In 1935, 281 cases were inspected by the Council's Ophthalmic Surgeon and spectacles were prescribed for 122 cases compared with 218 cases inspected and spectacles prescribed for 116 cases in 1934. During the year 129 pairs of spectacles were supplied and 84 repairs or alterations carried out.

The following cases were referred for conditions other than squint:—

Congenital cataract 3, photophobia 4, blepharitis 2.

One case each of—

Coloboma of iris and choroid.

Ptosis.

Nystagmus.

Microphthalmus.

Cyst on eyebrow

Styes.

Eye discharge.

Corneal opacity.

Deformities and Crippling Conditions.

The importance of early treatment of these conditions is constantly being emphasized; the supervision of under school age children has generally improved so that although there is no diminution in the number of new cases admitted to the Clinic registers during the year, the treatment is being obtained earlier and for slighter degrees of defect. It will be noted that eight new cases of infantile paralyses were referred in 1935 as against 3 in the previous year.

Work done in Hospital for Children under school age during 1935.

Defect	Nature and Number of Operations	Treatment Other than Operations
Congenital Club Foot ...	Fasciotomy and Manipulation ... 10	Splints ... 10
Congenital Dislocation of Hip ...	Reduction and "Shelf" Operation ... 1	
Infantile Paralysis ...	—	Massage and Splints ... 4
Congenital Spastic Paralysis	Elongation of Tendo Achillis ... 1	—
Staph. Arthritis Hip ...	Drainage Abscess ... 1	Immobilisation and Weight Extension ... 1
RICKETS. Bowed Tibia ...	Osteoclasis Tibia ... 3	Anteroclutic ... 3
Genu Valgum ...	Osteotomy Femur ... 2	
Supracondylar Fracture, Humerus ...	Open Reduction ... 1	
Accessory Thumbs ...	Removal ... 1	
	20	18

In addition to those children dealt with at the County Council clinics, there were on the 31st December, 1935, seven children on the Register of the Southampton Borough Council's Orthopædic Clinic and thirteen at Portsmouth.

The Christchurch Orthopædic Clinic was closed in July, 1935. It was re-opened in March, 1936, staffed by a Surgeon from the Royal Victoria and West Hants Hospital, Boscombe, and a local masseuse.

Return showing work done in Clinics and Hospitals in respect of Children under School Age.

CLINICS.													HOSPITALS.									
Defect Group No.	DEFECT	Total No. attending Dec. 31st, 1934	Awaiting Hospital Treatment	Under Clinic Supervision only	New cases admitted to Register during 1935	Recommended Hospital Treatment	Recommended Clinic Supervision only	No Treatment required	DISCHARGED					No. in Hospital Dec. 31st, 1934	New Cases Admitted, 1935	DISCHARGED				No. in Hospital, Dec. 31st, 1935		
									Cured	Improved	Needing no Treatment	To over 16 School Age	Left County, Died, or Treatment refused			Total No. on Books Dec. 31st, 1935	Cured	Improved	To attend Clinic		Needing no Treatment	Stationery	Died
1	INFANTILE PARALYSIS	2	—	2	8	3	4	1	—	1	—	—	—	9	3	5	—	5	—	—	—	3
2	SPASTIC PARALYSIS ...	4	—	4	4	1	3	—	—	—	—	—	1	6	—	1	—	1	—	—	—	—
3	BIRTH PALSY ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
DEFORMITIES :—																						
CONGENITAL																						
4	Talipes equino varus ...	20	—	20	6	2	4	—	—	1	—	—	3	19	2	5	—	3	—	—	—	4
5	Torticollis ...	2	—	2	1	—	1	—	—	2	—	—	—	1	1	—	—	—	—	—	1	—
6	Dislocation of hip ...	4	—	4	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
7	Spine ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
8	Other defects ...	14	—	14	6	1	4	1	2	1	—	—	2	11	2	3	—	4	—	—	—	1
TRAUMATIC																						
9	Fracture ...	—	—	—	1	1	—	—	—	—	—	—	—	1	—	1	—	1	—	—	—	—
10	Dislocation ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	Other defects ...	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
OTHER																						
12	Kyphosis ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
13	Scoliosis ...	—	—	—	1	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—
14	Pes planus ...	9	—	9	16	—	16	—	2	1	—	—	—	20	—	—	—	—	—	—	—	—
15	Other foot deformities...	11	—	11	12	—	11	1	—	1	—	—	3	14	—	—	—	—	—	—	—	—
16	Other defects ...	7	—	7	2	—	2	—	—	—	—	—	1	7	—	—	—	—	—	—	—	—
RICKETS																						
17	Genu valgum ...	20	—	20	24	2	21	1	—	1	—	—	1	27	—	2	—	1	—	—	—	1
18	Genu varum ...	22	1	21	12	2	10	—	—	7	—	2	3	22	1	3	—	4	—	—	—	—
19	Other defects (including combination of more than one defect) ...	12	—	12	9	1	8	—	1	1	—	—	2	15	—	—	—	—	—	—	—	—
INFLAMMATIONS :—																						
20	Arthritis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
21	Ankylosis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
22	Osteomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
23	OTHER DEFECTS	2	—	2	2	—	2	—	1	—	—	—	—	2	—	1	—	—	—	—	—	1
	TOTALS ...	132	1	131	104	13	87	4	6	19	4	33	17	157	9	22	—	19	—	1	—	11

Dental Inspection and Treatment.

The following table shows the work done in this direction by the Dental Surgeons in 1935 (the figures in brackets refer to 1934):—

No. Inspect- ed by Dental Surgeons at Centres	No. found to require treatment by Dental Surgeons at Centres	No. treated	No. re-treated	Attendances made	No. of fillings	No. of extractions	No. of general anæsthetics	No. of other operations
1697 (2130)	492 (593)	745 (745)	24 (86)	998 (931)	631 (747)	880 (856)	225 (186)	689 (873)

Dental Treatment for Nursing Mothers.

As reported last year, it was found that the amount of time occupied in treating nursing mothers encroached unduly on that available for the Dental Surgeons' other activities and treatment of nursing mothers who had received no treatment before confinement was discontinued after November, 1933.

Sanitary Circumstances of the Area.

1. (i) Water.

(ii) Drainage and Sewerage.

The following are the main extensions and improvements made in the Areas of Urban and Rural Districts with regard to Water Supply, Drainage and Sewerage.

Urban Districts.

Alton. Water main extended to Windmill Hill and Windmill Lane.

A Sewerage Scheme providing for enlarging and renewing pumping plant, enlarging tanks and filter at the disposal works, re-construction of certain sewers in the Town and the drainage of Holybourne, has been in progress during the year and is now nearing completion.

Basingstoke. A new water main has been laid to the South Ham (No. 3) Housing Estate and schemes are in course of preparation for unsewered parts of Winklebury, Kempshott, Worting, Viables Estate, Cranbourne Lane and Winchester Road.

Havant and Waterloo. New 8-inch trunk water main laid from the Waterlooville Cross Roads to the Pumping Station at Cowplain.

Lymington. No major alterations or extensions in the water supply carried out during the year. A new sewerage scheme for the greater part of the unsewered portions of the district is in course of preparation.

Petersfield. Water mains have been extended to new building estates. A sewerage scheme has been prepared for the sewerage of the Village of Sheet and for extensions to the existing Sewage Disposal Works at Durford Road. Tilmore Sewerage Scheme has been completed and nearly all the houses in this area have been provided with new drainage systems with connection to the new sewers.

Romsey. Extensions of Water, Drainage and Sewerage services to new housing estates have been carried out.

No important extensions in relation to Water Supply, Drainage and Sewerage were carried out during the year in the Urban Areas of Aldershot, Andover, Christchurch, Eastleigh, Fareham, Farnborough, Fleet, Gosport and Winchester.

Rural Districts.

Alton. Extensions of mains of Wey Valley Water Co. to supply the Parishes of Selborne, Farringdon and Chawton.

Andover. Provision of piped supplies of water to Appleshaw, and Vernham Dean by extension of supply from Ludgershall Water Company's well and from a new bore put down by the District Council respectively.

Basingstoke. The Farnborough & Frimley, now the Mid-Wessex Water Co., have acquired powers to extend their statutory area to include the Parishes of Basing, Bramley, Hartley Wespall, Monk Sherborne, Mortimer West End, Pamber, Silchester, Sherborne St. John, Stratfield Saye and Stratfield Turgis but have not yet extended their mains. There have been extensions made to the area supplied by the Manydown Estate which now covers practically the whole of the Parishes of Wootton St. Lawrence and Oakley.

Droxford. Extensions of water supply to Bunker Hill, Denmead, under guarantee of the District Council to the Portsmouth Water Co. and to Green Lane, Hambledon by private arrangement.

Hartley Wintney. The Council has undertaken considerable improvements in the amount of water available for supply and in the distribution.

Kingsclere and Whitchurch. A piped water supply is being provided for the Parish of Overton from a new well sunk by the Council. A system of sewerage is also being undertaken.

New Forest. Certain extensions of water mains have been carried out. The work of the large Sewerage Scheme for the Parish of Eling is being proceeded with satisfactorily. This Scheme involves laying approximately 23 miles of sewers.

Petersfield. The mains of the Wey Valley Water Co. have been extended to Greatham and a Scheme for the supply of Froxfield Parish with water from a new source has been approved and will shortly be commenced. Water Schemes in respect of the Parishes of Langrish and Hawkley are in hand. Work on a Sewerage Scheme for Rowlands Castle is also in hand.

Ringwood and Fordingbridge. The West Hants Water Co. have extended their statutory Area to include the whole of the rest of the District and have laid mains through the Parishes of Ellingham, Harbridge, and Ibsley to Fordingbridge, supplying these parishes; large extensions of their mains have also been made in the Parishes of Burley, Christchurch East and Sopley.

Romsey and Stockbridge. No important alterations or extensions carried out in Water Supply, Drainage and Sewerage Services during the year.

Winchester. No important alterations or extensions carried out in Water Supply, Drainage and Sewerage Services during the year. There are several Sewerage Schemes under consideration.

2. Rivers and Streams.

No special action has been undertaken during the year to check the pollution of rivers and streams in the County.

3. Closet Accommodation, Public Cleansing, etc.

There are no special points of importance with regard to these in the County Area to which attention need specially be drawn.

4. Schools.

The Sanitary condition and water supply of schools, etc. are dealt with in the Annual Report made to the Board of Education on the School Medical Service.

Inspection and the Supervision of Food.

Milk.

The following table shows the work of the Local Sanitary Authorities in this connection during the year 1935. It should be noted that in several instances in the Rural Districts the number of cowkeepers again exceeds the number of inspections made and that the cow population has increased by about 4,000. By agreement in some areas the supervision of the premises of milk producers who are registered as "Accredited" by the County Council's Dairy Officers is taken by the District Councils to be adequate for the purposes of the Milk and Dairies Act, 1915, and no action is taken by the District Council's Officers in respect of these premises. The number of samples found to contain tubercle bacilli is the greatest yet recorded in any year, 3.4 per cent. of samples submitted being found infected as against 2.4 in 1934. This result may be due to greater discrimination on the part of those submitting the samples and in any case, owing to the small proportion of herds sampled, cannot be taken as any cogent evidence of a rise in incidence generally.

URBAN.

District	No. of Cowkeepers	Approx. No. of Cows	No. of Inspections made during year	Samples Sent	Number Positive in 1934
Aldershot	3	60	45	—	1
Alton	17	324	54	1	—
Andover	14	272	68	12	1
Basingstoke	6	129	61	1	—
Christchurch	21	390	30	4	1
Eastleigh	28	700	210	11	1
Fareham	55	900	175	26	1
Farnborough	4	117	49	4	—
Fleet	5	43	16	3	—
Gosport	12	356	215	63	3
Havant & Waterloo ...	64	1280	142	16	—
Lymington	89	1103	174	28	2
Petersfield	24	370	52	5	—
Romsey	11	100	48	1	1
Winchester	9	230	20	4	—
Totals ...	362	6374	1359	179	11

RURAL.

Alton	182	Not known	318	74	1
Andover	93	1814	109	22	—
Basingstoke	158	2300	140	70	1
Droxford	318	3000	378	38	2
Hartley Wintney ...	177	2800	128	27	1
Kingsclere & Whitechurch	215	2828	333	68	1
New Forest	321	2600	531	88	6
Petersfield	180	5260	647	37	1
Ringwood & Fordingbridge ...	281	3450	550	83	1
Romsey & Stockbridge	298	4900	120	63	—
Winchester	270	3300	857	76	3
Totals ...	2493	32252	4111	646	17
Combined Totals ...	2855	38626	5470	825	28

Milk (Special Designations) Order, 1936.

This order, which came into force on 1st April, 1936, somewhat reduces the confusing nomenclature of the previous Order on the lines advocated in my report for 1929. It may be that the hopes therein expressed of "a general raising of the standard of milk sold so that Grade A will be the normal" are within sight of fulfilment during the next ten years.

Milk and Dairies (Amendment) Act, 1922.**Milk (Special Designations) Order, 1923.**

Under the Order of 1923, certain grades of milk are authorised to be sold under licence. The licences require a fairly high standard of purity and cleanliness, and demand expenditure of time, care and money by the producer. Section 3 of the Act makes it an offence for any producer to apply a description to his milk which even resembles the description accorded to graded milks. There has been a tendency for certain producers to describe their products as "Milk from Tuberculin Tested Cows" which is, undoubtedly, a description resembling one of those in the graded milk list. The attention of all Authorities was drawn to the matter in 1931 but no action has been needed by any Authority during the year under review.

The number of producers of graded milk in the County, licensed by the Ministry, is 41.

The number of licences issued during 1935 by Local Authorities to sell graded milks was 158 (54), and pasteurised milk 23 (20). The first mentioned figure shows a sharp increase over the 1934 figure—occasioned, of course, by the introduction of the Accredited Milk Scheme. It should be stated, in this connection, that the issue of licences under this heading fell to be dealt with by the County Council as from the 1st January, 1936, and Local Authorities were relieved of this responsibility as from that date. At the time of writing this report, the number of licences in issue is 463.

Tuberculous Milk.

As in the past, veterinary inspections of milk producing herds are carried out as a result of suspicion arising in three ways:—

- (a) Notification of the finding of infected milk in areas without the County, the milk being produced within the County;
- (b) The discovery in the County of infected milk produced within the County;
- (c) The discovery of tubercle-infected carcasses of bovine animals or pigs.

With regard to (a) 30 (14) such notifications were received in 1935; they involved the inspection of 26 (12) herds, the examination of 1,114 (402) cows, and the taking and examination of 316 (95) samples of milk. As a result 16 (7) cows were found to be giving tuberculous milk, and destroyed. The figures in brackets are the corresponding figures for 1934.

There were three instances (not included in any of the foregoing figures) of a Sanitary Inspector reporting the existence of suspected cattle at farms which he had inspected in connection with his duties under the Milk and Dairies Order. The three instances involved 51 cows, the taking and examination of 11 milk samples and the seizing of 3 cows under the Tuberculosis Order.

The Medical Officer of Health of the London County Council has been good enough to furnish me with the following figures relating to the bacteriological examination of milk received in London from the County of Hampshire.

Year.				No. of samples Taken.	Percentage of completed exam- inations found to contain tubercle bacilli.	
1927	...	...	...	181	...	4.3
1928	...	...	...	151	...	5.08
1929	...	...	...	125	...	14.01
1930	...	...	...	177	...	8.6
1931	...	...	...	141	...	11.3
1932	...	...	...	155	...	11.1
1933	...	...	...	207	...	3.8
1934	...	...	...	89	...	8.1
1935	...	...	...	373	...	9.97

With regard to (b), the scheme approved by the County Council in July, 1930, and continued during 1935 included:—

- (1) The biological examination of a maximum number of 800* samples collected by the Sanitary Inspectors of the District Councils on a quota system, otherwise at random;
- (2) The payment to District Councils of out-of-pocket expenses together with one shilling per sample for the services of the Sanitary Inspector.

The work done in 1935 under this head is summarised in the following table:—

	1931	1932	1933	1934	1935
Number of producers	2691	2745	2679	2828	2855
Samples received during the year	384	711	807	847	825
Number of producers sampled ...	343	614	727	739	757
Percentage of producers sampled	12.75	22.36	27.13	26.13	26.51
Number of samples found positive	21	22	19	20	28
Percentage found positive ...	5.4	3.1	2.3	2.36	3.39
Approximate number of cows in herds sampled	4812	9136	11250	11176	10182
Number of cows found to be tuberculous	10	14	20	19	22
Percentage of cows found to be tuberculous	0.207	0.15	0.18	0.17	0.21
Number of cows examined by veterinary surgeons	1489	1083	755	599	796

It will be noted that an increased percentage of positive samples is recorded.

Three samples of milk submitted for examination to the Clinical Research Association by the Farnborough Urban District Council were found to be tubercle infected. Two herds were inspected and two cows seized. The third herd was located in Berkshire. In one case two samples of sputa were examined, but without a positive result.

As to (c) 159 (184) notifications were received from the following sources of the finding of tubercle-infected carcasses in slaughter houses.

Aldershot Borough	...	...	...	...	...	11	(10)
Andover Borough	...	...	...	...	...	—	(—)
Basingstoke Borough	...	...	...	...	...	1	(2)
Droxford Rural	...	...	...	...	...	4	(3)
Fareham Urban	...	...	...	...	...	1	(7)
Eastleigh Urban	...	...	...	...	...	1	(11)
Farnborough Urban	...	...	...	...	...	—	(2)

Gosport Borough	...	...	...	...	...	...	47	(21)
Havant and Waterloo Urban	...	...	...	...	...	...	2	(2)
New Forest Rural	...	...	...	...	...	...	3	(1)
Petersfield Rural	...	...	...	...	...	...	5	(1)
Ringwood and Fordingbridge Rural	...	...	...	...	...	...	—	(—)
Romsey Borough	...	...	...	...	...	...	13	(22)
Romsey and Stockbridge Rural	...	...	...	...	...	...	—	(—)
Winchester City	...	...	...	...	...	...	6	(30)
Winchester Rural	...	...	...	...	...	...	1	(—)

Outside Authorities:—

Bournemouth	...	...	...	...	...	...	2	(—)
Brighton	...	...	...	...	...	...	1	(—)
Fareham Market Company	...	...	...	...	...	...	14	(—)
Newbury	...	...	...	...	...	...	5	(8)
Portsmouth	...	...	...	...	...	...	4	(25)
Southampton	...	...	...	...	...	...	38	(38)

In 72 (99) instances visits were paid to the premises concerned either by the Veterinary Inspector (50) or the Sanitary Inspector of the Local Authority (22).

I am glad to be able here to recognise the valuable and continuous co-operation which has been offered by the Sanitary Inspectors.

The 72 (99) cases involved 1860 (2345) milking cows and the taking and transmission of 379 (583) samples of milk. As a result 8 were found to be affected with tuberculosis and the offending animals slaughtered. The ratio of cows so slaughtered to the number of cases shows a considerable fall as compared with last year.

In 25 (51) instances no action was taken either because the animals reported were cottagers' pigs, or there was no milking herd.

In 37 instances the notifications were concerned with one slaughterhouse in a southern Borough, the owner of which consistently refuses to give any information as to the source from which he obtains the animals. The position is being watched closely and further developments are anticipated.

In 13 instances the premises concerned were situated outside the County and in 12 instances action had been taken previously on earlier notifications or other causes.

It will be observed that a Market Company has forwarded notifications of infected cattle, their information being derived from claims on their insurance scheme. I am glad to recognise the co-operation so offered.

The work done under the Tuberculosis Order for the year 1935 is shown in the appended table, which has been compiled from quarterly returns rendered by the Clerk of the Council to the Ministry of Agriculture.

Analysis of Work Done during 1935 under Tuberculosis Order, 1925.

No. of Premises on which disease reported and NOT confirmed by Veterinary Inspector.	No. of Premises on which disease declared and FOUND by Veterinary Inspectors.	Total No. of Animals on Premises.	Total No. of Animals examined on premises by Veterinary Inspectors.	Total No. of Animals reported as diseased by Veterinary Inspector.					No. of cases in which diagnosis was aided by tuberculin.	Conclusions from Post Mortem.				
				A	B	C	D	E		A	B	C	D	E
				Having T.B. Udder	Giving T.B. Milk	Tuberculous Emaciation	Chronic cough and showing definite clinical signs of T.B.	Total		Having T.B. Udder	Giving T.B. Milk and Showing lesions	Suffering from Emaciation	Affected, but not as A, B, or C.	Not affected
22 (15)	119 (103)	Cows in Milk 3461 (2882)	280 (563)	20 (11)	17 (22)	30 (21)	34 (22)	101 (76)	(a) 24 (14)	61 (41)	4 (7)	20 (13)	16 (12)	— (—)
		Other cows or heifers 1706 (1507)	37 (213)	2 (3)	1 (8)	11 (16)	12 (13)	26 (40)	5 (6)	7 (21)	— (1)	9 (10)	10 (9)	— (—)
		Other bovine animals 811 (1083)	5 (20)	— (—)	— (—)	1 (1)	3 (2)	4 (3)	1 (1)	— (—)	— (—)	1 (1)	3 (1)	— (1)

Note.—Re Column “No. of cases in which diagnosis was aided by Tuberculin,” (a) including cases in which disease was reported but not confirmed by Veterinary Inspector. Excluding such cases the numbers are those shown under (b).

Of the 101 milch cows reported as diseased by the Veterinary Inspectors in the above table, 60 were detected by the agency of the Public Health Department, as follows:—

(a) By routine sampling	...	...	...	...	29	(19)
(b) By following up notifications of tuberculous carcasses	...	...	...	...	8	(26)
(c) By following up notifications of the finding of tuberculous milk by outside authorities	...	...	...	...	19	(4)
(d) By other means	...	...	...	...	4	(2)
					60	(51)

Clean Milk.

The Accredited Producers Scheme made by the Milk Marketing Board under the Milk Act of 1934 came into operation in this County on 1st May, 1935. The arrangements were entirely under the control of the Agricultural Education Committee, a whole time Veterinary Surgeon was appointed to help conduct inspection of cows belonging to those wishing to be registered, and four Dairy Officers to inspect and advise on methods of milk production and any necessary alteration in premises. Sampling is done by these Dairy Officers and the bacteriological work done in the County Laboratory, the results being transmitted to the County Agricultural Organiser. There has been a good response from milk producers and it is hoped that methods of milk production are being improved gradually.

Improvement and Co-ordination of Supervision of Milk Supplies.

In view of the limited amount of control that has so far been possible over the marketing of tubercle infected milk, it has been suggested from time to time that either routine sampling now carried out should be extended or a system of veterinary inspection adopted. With the coming into force of the Accredited Producers Scheme and the Milk (Special Designations) Order, 1936, the time appeared opportune for a special reconsideration of the best methods to adopt to insure the greatest protection to the public together with the maximum co-ordination between the various Councils, Committees and officials concerned. The County Council has therefore set up a Committee on which have been appointed members of the Agricultural, Diseases of Animals, General Purposes and Public Health Committees to discuss the whole subject in the light of past experience and recent Acts and Orders.

Food and Drugs.

Samples for examination under the Food and Drugs Act are taken by the County Inspectors acting under the direction and supervision of the County Medical Officer. The County is divided into two parts for this purpose, and the Inspectors reside at Basingstoke and Southampton respectively. During the year 1,555 samples were taken, and of these 65, or 4.18 per cent. were found on analysis to be unsatisfactory. (The corresponding figures for 1934 were: Samples taken 1,516; samples unsatisfactory 68, or 4.49 per cent.). The unsatisfactory samples consisted of New Milk 53, Skimmed Milk 1, Separated Milk 1, Sausage 3, Jam 3, Whiskey 2, and Wine 2. Of the 1,555 samples, 921 or approximately 59.22 per cent. were milk samples. Milk is also subjected to test (bacteriologically) under the Milk and Dairies Act, and this subject is dealt with on page 54.

Prosecutions.

Fifteen prosecutions were undertaken during the year (New Milk 12, Whiskey 2, and Separated Milk 1). Fines, with or without costs, were imposed in nine cases and six were dismissed (three on payment of costs, and three without).

The following statement shows all samples taken during the year, the percentage unsatisfactory, and compares the present with the preceding year.

Article	1935						1934					
	Formal			Informal			Formal			Informal		
	Exam- ined	Unsatis- factory	Percent- age Unsatis- factory	Exam- ined	Unsatis- factory	Percent- age Unsatis- factory	Exam- ined	Unsatis- factory	Percent- age Unsatis- factory	Exam- ined	Unsatis- factory	Percent- age Unsatis- factory
Almonds, Ground ...	—	—	—	4	—	—	—	—	—	1	—	—
Ammon. Tinct. Quinine...	—	—	—	5	—	—	1	—	—	5	—	—
Ammon. Tinct. Quinine Tabs. ...	—	—	—	—	—	—	—	—	—	4	—	—
Arrowroot ...	—	—	—	5	—	—	—	—	—	6	—	—
Arrowroot Biscuits ...	—	—	—	1	—	—	—	—	—	—	—	—
Aspirin ...	—	—	—	7	—	—	—	—	—	6	—	—
Aspro ...	—	—	—	1	—	—	—	—	—	2	—	—
Baking Powder ...	—	—	—	4	—	—	—	—	—	6	—	—
Barley Pearl ...	—	—	—	1	—	—	—	—	—	3	—	—
Beans, Tinned ...	—	—	—	1	—	—	—	—	—	2	—	—
Beef, Potted ...	—	—	—	—	—	—	—	—	—	1	—	—
Beer ...	—	—	—	—	—	—	—	—	—	4	—	—
Bisurated Magnesia ...	—	—	—	1	—	—	—	—	—	—	—	—
Boric Acid Powder ...	—	—	—	2	—	—	—	—	—	2	—	—
Boric Ointment ...	—	—	—	—	—	—	—	—	—	1	—	—
Brandy ...	—	—	—	2	—	—	—	—	—	5	—	—
Brawn ...	—	—	—	5	—	—	—	—	—	1	—	—
Bread ...	—	—	—	4	—	—	—	—	—	—	—	—
Bread Crumbs ...	—	—	—	1	—	—	—	—	—	—	—	—
Bread and Butter ...	—	—	—	—	—	—	—	—	—	1	—	—
Butter ...	2	—	—	52	—	—	1	—	—	53	—	—
Camphorated Oil ...	—	—	—	7	—	—	—	—	—	7	—	—
Candied Peel ...	—	—	—	1	—	—	—	—	—	1	—	—
Castor Oil ...	—	—	—	7	—	—	—	—	—	6	—	—
Cherries, Glace ...	—	—	—	—	—	—	—	—	—	1	—	—
Cheese ...	—	—	—	17	—	—	—	—	—	20	—	—
Cheese Biscuits ...	—	—	—	2	—	—	—	—	—	—	—	—
Cheese and Celery ...	—	—	—	1	—	—	—	—	—	1	—	—
Chocolate ...	—	—	—	—	—	—	—	—	—	1	—	—
Cinnamon ...	—	—	—	5	—	—	—	—	—	4	—	—
Citrate of Magnesia ...	—	—	—	1	—	—	—	—	—	1	—	—
Cocoa ...	—	—	—	7	—	—	—	—	—	7	—	—
Cod Liver Oil ...	—	—	—	—	—	—	—	—	—	1	—	—
Coffee ...	1	—	—	15	—	—	1	—	—	15	—	—
Cornflour ...	—	—	—	2	—	—	—	—	—	4	—	—
Cream ...	—	—	—	22	—	—	1	—	—	16	—	—
Cream, Tinned ...	—	—	—	11	—	—	—	—	—	11	—	—
Cream of Tartar ...	—	—	—	3	—	—	—	—	—	1	—	—
Custard Powder ...	—	—	—	5	—	—	—	—	—	5	—	—
Dripping ...	—	—	—	3	—	—	—	—	—	4	—	—
Eucalyptus Oil ...	—	—	—	—	—	—	—	—	—	1	—	—
Fish Paste ...	—	—	—	12	—	—	—	—	—	10	—	—
Fish, Tinned ...	—	—	—	6	—	—	—	—	—	5	—	—
Flour ...	—	—	—	7	—	—	—	—	—	9	—	—
Flour, Self-Raising ...	—	—	—	15	—	—	—	—	—	11	—	—
Force ...	—	—	—	—	—	—	—	—	—	1	—	—
French Slices ...	—	—	—	1	—	—	—	—	—	—	—	—
Friar's Balsam ...	—	—	—	—	—	—	—	—	—	2	—	—
Fruits, Crystallised ...	—	—	—	2	—	—	—	—	—	—	—	—
Fruits, Dried ...	—	—	—	—	—	—	—	—	—	3	—	—
Fruits, Preserved ...	—	—	—	1	—	—	—	—	—	—	—	—
Fruit, Tinned ...	—	—	—	1	—	—	—	—	—	—	—	—
Gentian Root ...	—	—	—	1	—	—	—	—	—	—	—	—
Gin ...	—	—	—	17	—	—	—	—	—	14	—	—
Ginger, Ground ...	—	—	—	5	—	—	—	—	—	7	—	—
Ginger Root ...	—	—	—	1	—	—	—	—	—	1	—	—
Ginger Wine ...	—	—	—	1	—	—	—	—	—	1	—	—
Glauber Salts ...	—	—	—	1	—	—	—	—	—	—	—	—
Glycerine ...	—	—	—	3	—	—	—	—	—	3	—	—
Golden Syrup ...	—	—	—	2	—	—	—	—	—	2	—	—
Carried forward ...	3	—	—	281	—	—	4	—	—	279	—	—

Brought forward...	3	—	—	281	—	—	4	—	—	279	—	—
Honey	—	—	—	10	—	—	—	—	—	12	—	—
Hypophosphites, Syrup of	—	—	—	1	—	—	—	—	—	—	—	—
Ice Cream	—	—	—	5	—	—	3	—	—	3	—	—
Iodine	—	—	—	5	—	—	1	—	—	11	1	9.09
Jam	1	1	100	19	2	10.52	1	—	—	21	—	—
Jelly	—	—	—	1	—	—	—	—	—	—	—	—
Lard	—	—	—	21	—	—	1	—	—	19	—	—
Lemon Curd	—	—	—	5	—	—	—	—	—	8	—	—
Lemon Crystals	—	—	—	1	—	—	—	—	—	—	—	—
Lemon Juice	—	—	—	—	—	—	—	—	—	1	—	—
Lemon Squash	—	—	—	1	—	—	—	—	—	—	—	—
Liquorice Powder	—	—	—	—	—	—	—	—	—	1	—	—
Macaroni	—	—	—	2	—	—	—	—	—	1	—	—
Maclean's Stomach Powder	—	—	—	—	—	—	—	—	—	3	—	—
Magnesia	—	—	—	—	—	—	—	—	—	1	—	—
Margarine	—	—	—	14	—	—	—	—	—	21	—	—
Marmalade	—	—	—	4	—	—	—	—	—	—	—	—
Meat Paste	—	—	—	6	—	—	—	—	—	7	—	—
Meat Pie	—	—	—	6	—	—	—	—	—	5	—	—
Meat Roll	—	—	—	1	—	—	1	—	—	1	—	—
Meat, tinned	1	—	—	6	—	—	—	—	—	3	—	—
Mercury Ointment	—	—	—	—	—	—	—	—	—	3	—	—
Milk, New	718	49	6.81	203	4	1.97	720	58	8.05	145	2	1.38
Milk, Chocolate	1	—	—	—	—	—	—	—	—	—	—	—
Milk, Condensed or Evaporated	—	—	—	4	—	—	—	—	—	4	—	—
Milk, Condensed Skimmed	—	—	—	6	—	—	—	—	—	4	—	—
Milk, Separated	2	1	50	1	—	—	7	1	14.3	—	—	—
Milk, Skimmed	2	1	50	—	—	—	2	1	50	—	—	—
Milk, Sterilised	2	—	—	—	—	—	3	—	—	1	—	—
Milk, Tinned	—	—	—	—	—	—	—	—	—	3	—	—
Milk of Magnesia	—	—	—	—	—	—	—	—	—	1	—	—
Milk of Sulphur	—	—	—	—	—	—	—	—	—	2	—	—
Malted Milk Cocoa	—	—	—	—	—	—	—	—	—	1	—	—
Mint Sauce	—	—	—	1	—	—	—	—	—	—	—	—
Mincedmeat	—	—	—	3	—	—	—	—	—	—	—	—
Mint, dried	—	—	—	1	—	—	—	—	—	—	—	—
Mustard	—	—	—	2	—	—	—	—	—	2	—	—
Nitre, Sweet Spirit of	—	—	—	1	—	—	2	1	50	2	2	100
Oatmeal	—	—	—	2	—	—	—	—	—	—	—	—
Oats, Porridge	—	—	—	—	—	—	—	—	—	1	—	—
Olive Oil	—	—	—	4	—	—	—	—	—	6	—	—
Orange Quinine Wine, Tonic	1	1	100	—	—	—	—	—	—	—	—	—
Paregoric	—	—	—	2	—	—	—	—	—	—	—	—
Peas, Packet	—	—	—	2	—	—	—	—	—	4	—	—
Peas, Tinned	—	—	—	7	—	—	—	—	—	5	—	—
Pepper	—	—	—	2	—	—	—	—	—	4	—	—
Peppermint Essence	—	—	—	—	—	—	—	—	—	1	—	—
Polony	—	—	—	—	—	—	—	—	—	1	—	—
Prescriptions	—	—	—	—	—	—	—	—	—	2	—	—
Raisin Cordial	—	—	—	1	—	—	—	—	—	—	—	—
Raisins, Stoned	—	—	—	—	—	—	—	—	—	1	—	—
Rice	—	—	—	4	—	—	1	—	—	2	—	—
Rice Flaked	—	—	—	1	—	—	—	—	—	2	—	—
Rice Ground	—	—	—	3	—	—	—	—	—	6	—	—
Ruby, Fancy Tawny Wine	1	1	100	—	—	—	—	—	—	—	—	—
Rum	—	—	—	18	—	—	—	—	—	22	—	—
Ryvita	—	—	—	—	—	—	—	—	—	1	—	—
Sausage	3	1	33.3	46	2	4.34	1	1	100	46	1	2.19
Sausage Roll	—	—	—	2	—	—	—	—	—	—	—	—
Seidlitz Powder	—	—	—	3	—	—	—	—	—	4	—	—
Semolina	—	—	—	—	—	—	—	—	—	1	—	—
Sponge Cake	—	—	—	3	—	—	—	—	—	3	—	—
Shredded Wheat	—	—	—	—	—	—	—	—	—	1	—	—
Suet	—	—	—	11	—	—	—	—	—	12	—	—
Carried forward ...	735	55	—	722	8	—	747	62	—	690	6	—

Brought forward...	735	55	—	722	8	—	747	62	—	690	6	—
Sugar	—	—	—	4	—	—	—	—	—	4	—	—
Sulphur	—	—	—	1	—	—	—	—	—	—	—	—
Sweets	—	—	—	3	—	—	—	—	—	—	—	—
Syrup of Figs	—	—	—	3	—	—	—	—	—	3	—	—
Tapioca	—	—	—	1	—	—	—	—	—	—	—	—
Tea	—	—	—	18	—	—	1	—	—	17	—	—
Tomato Ketchup	—	—	—	1	—	—	—	—	—	—	—	—
Tomato Sauce	—	—	—	1	—	—	—	—	—	—	—	—
Tomato Soup	—	—	—	1	—	—	—	—	—	—	—	—
Treacle	—	—	—	2	—	—	—	—	—	3	—	—
Vaseline	—	—	—	1	—	—	—	—	—	—	—	—
Vinegar	—	—	—	7	—	—	—	—	—	8	—	—
Vita Weat	—	—	—	—	—	—	—	—	—	1	—	—
Whiskey	4	2	50	50	—	—	1	—	—	40	—	—
Zinc Ointment	—	—	—	1	—	—	—	—	—	1	—	—
Totals	739	57	7.71	816	8	.98	749	62	8.28	767	6	.78

Nutrition.

No special work on dissemination of knowledge of nutrition has been carried out by the County Council except that shown in the section of this report on Infant Welfare. The lectures and demonstrations there mentioned are much appreciated and should prove very helpful.

Prevalence of and Control over Infectious Diseases.

Institutional Accommodation for Infectious Diseases.

In the report for the year 1934 there was included a copy of the Scheme prepared by the Council under the provisions of Section 63 of the Local Government Act, 1929, and approved by the Ministry of Health.

This Scheme involves the provision of extensions to some of the Institutions in the County as well as the entering into Agreements by certain District Councils with the owners of Hospitals either inside or outside the County. Some progress has been made in carrying out the requirements, but as in most cases there are several Authorities concerned, the matter takes time and there must be delay in providing all the accommodation indicated. The position may be summarised thus.

Institutions in the County Area. In the following cases the accommodation provided already meets with the requirements of the Scheme, namely the Isolation Hospitals at Alton, Basingstoke, Eastleigh, Gosport, Petersfield and Winchester.

ALDERSHOT URBAN. Proposals for extending the accommodation (from 35 to 52 beds) have been approved.

ANDOVER URBAN. The Scheme requires the present accommodation (eight beds) to be extended to make provision for a total of 21 and plans are in course of preparation.

FAREHAM URBAN. This Institution has accommodation for 15 beds, the Scheme requires 22 and the matter is being considered by the District Council.

HAVANT AND WATERLOO URBAN. The Scheme as approved sanctioned the use of this Hospital for the inhabitants of the district but recently the Town Council has decided to adopt the suggestion originally put forward by the County Medical Officer and to enter into an arrangement with the Portsmouth City Council for the reception of cases from the District into the Corporation's Institution. By the terms of the new Agreement a maximum of 36 beds will be available for such cases.

LYMINGTON URBAN. Plans are in course of preparation for the extension of the Hospital which by the Scheme should have accommodation for 15 patients as against six at present.

District Councils which have no Hospitals. It is mainly in connection with this part of the Scheme that difficulties are being met.

CHRISTCHURCH URBAN. Eight beds are required for this area and there has been correspondence over a prolonged period with the Town Council of Poole in the hope that an Agreement might have been made with that Authority but so far with no result.

RINGWOOD AND FORDINBRIDGE RURAL. The Scheme provides for 12 beds for this area but the difficulties of coming to a satisfactory arrangement for the use of beds in the Isolation Hospitals at Poole and Salisbury have not yet been solved.

NEW FOREST RURAL. According to its population and as set out in the Scheme there should be 21 beds for its area and five of these should be secured in Lymington Borough Hospital which would have to be extended for this purpose. The suggestion was made that an arrangement should be entered into with Southampton Town Council to secure the remaining accommodation necessary but the two Authorities have not, however, been able to agree upon terms.

ROMSEY URBAN. Four beds are needed for this area. The Council has an arrangement with Southampton Corporation for the reception of patients from the area but there is no definite provision.

ROMSEY AND STOCKBRIDGE RURAL. The Scheme specifies 11 beds for this area and the present position is similar to that in the case for Romsey Urban. The District Council has arrangements with Salisbury and Southampton respectively for the reception of patients but has not a satisfactory agreement.

WINCHESTER RURAL. Fifteen of the 21 beds needed for this area are provided in the Winchester City Council's Hospital and the District Council has an arrangement with the Southampton Corporation for the reception of patients for the part of its area for which the remaining six beds are required. Like the other authorities referred to above there is not, however, any definite provision.

The difficulties are, therefore, in connection with making definite arrangements with hospitals owned by Poole, Salisbury and Southampton at a rate which appears reasonable. No serious difficulties have arisen as yet in the actual admission of cases.

Notifications.

The tables on pages 68 and 69 give the number of cases of infectious diseases notified in each urban and rural district in the Administrative County during 1935 under the various Acts and Orders.

The returns for 1934 and 1935 are here summarised and compared:—

	1934	1935
Smallpox	1	0
Scarlet Fever	1969	1401
Diphtheria	346	308
Enteric Fever	9	12
Pneumonia	389	246
Puerperal Pyrexia	72	84
Puerperal Fever	24	14
Cerebro-Spinal Fever	4	4
Acute Poliomyelitis	36	3
Acute Polio-encephalitis	3	1
Encephalitis Lethargica	4	6
Dysentery	8	10
Ophthalmia Neonatorum	62	64
Erysipelas	170	113
Pulmonary Tuberculosis	342	282
Other Tuberculosis	118	105
Malaria	3	6

Vaccination.

Two annual returns have to be submitted to the Registrar-General as follows:—

- (a) In respect of successful primary vaccinations and re-vaccinations carried out by the Medical Officers of Public Assistance Institutions and Public Vaccinators during the year ended 30th September last.
- (b) In respect of the vaccinations of children whose births were registered during the calendar year next but one preceding.

A summary of these returns is given in the accompanying tables. It will be noticed from table (b) that while 3,549 were successfully vaccinated, no less than 2,768 submitted declarations of conscientious objection to vaccination. At the same time, 146 were unaccounted for, having removed to places unknown, etc.

(a) Return showing the number of persons successfully vaccinated and re-vaccinated at the cost of the rates by the Medical Officers of the Public Assistance Institutions and the Public Vaccinators during the year ended the 30th September, 1935.

Name of the Vaccination District or Public Assistance Institution	Name of Medical Officer or Public Vaccinator	Number of successful Primary Vaccinations of persons			Number of successful Re-vaccinations, i.e., successful vaccinations of persons who had been successfully vaccinated at some previous time
		Under one year of age	One year and upwards	TOTAL	
Aldershot Area.					
Aldershot	J. H. Gibson	256	11	267	1
Hartley Wintney ...	W. A. Clayton Cox ...	37	3	40	1
Odiham	E. A. Widdowson ...	24	4	28	—
Crondall	G. W. R. Rudkin ...	16	1	17	—
Farnborough	J. M. Forsyth	65	22	87	4
Fleet	F. H. S. Greenish ...	35	4	39	3
Alton Area					
Alton No. 1	H. Yates	26	—	26	—
„ No. 2	H. Currer Williams ...	60	1	61	4
„ No. 3	E. Shirley Jones ...	30	—	30	—
„ No. 4	S. F. Crowther-Smith ...	47	3	50	—
Basingstoke Area					
Basingstoke No. 1 ...	H. Keith Williams ...	43	—	43	2
„ No. 2	W. Kelly	9	—	9	—
„ No. 3	W. Kelly	19	—	19	—
„ No. 4	J. Anderson Hill ...	3	1	4	—
„ No. 5	N. Daly	1	—	1	—
„ No. 6	E. A. Widdowson ...	3	—	3	—
„ No. 7	H. Keith Williams ...	5	—	5	—
„ No. 8	N. Daly	8	—	8	1
„ No. 9	W. Kelly	—	—	—	—
Christchurch Area.					
Christchurch No. 1...	E. F. Hunt	11	2	13	—
„ No. 2	G. Maynard Brooks ...	35	—	35	1
Fordingbridge No. 1	E. P. N. Vickery ...	12	—	12	—
„ No. 2	J. F. Hamber	4	—	4	—
Ringwood	R. H. Little	26	3	29	2
Gosport Area.					
Alverstoke	J. C. Glen	287	35	322	7
Titchfield	D. A. Windemer ...	51	—	51	4
Fareham	T. Kirsopp	79	4	83	4
Southwick and Wickham ...	S. A. Belshaw	25	2	27	—
Havant No. 1	D. G. Cooper	58	1	59	—
„ No. 2	B. N. Norman	30	2	32	41
„ No. 3	L. S. H. Glanville ...	31	1	32	4
„ No. 4	A. J. May	21	1	22	1
Kingsclere and Whitechurch Area.					
Kingsclere	J. E. Pellow	9	2	11	—
Highclere	N. F. Kendall	17	1	18	—
Baughurst	N. Daly	6	—	6	—
Whitechurch No. 1 ...	W. F. V. Simpson ...	12	—	12	—
„ No. 2	W. F. V. Simpson ...	9	1	10	1
„ No. 3	G. Laurence	3	1	4	—
Lymington Area.					
Lymington No. 1 ...	H. L. Hodgkinson ...	9	2	11	—
„ No. 2	F. H. Maturin	1	—	1	—
„ No. 4	E. C. H. Huddy	28	1	29	6
„ No. 5	M. E. Leicester... ..	9	—	9	—
New Forest No. 1 ...	G. Habgood	120	6	126	3
„ No. 2	C. A. Dottridge	25	—	25	4
„ No. 3	T. C. A. Cleverton ...	22	—	22	—
„ No. 4	E. J. L. Jones Evans ...	41	1	42	—
Brockenhurst	R. M. de Mowbray ...	5	—	5	—
Petersfield Area.					
Catherington	J. K. G. Way	32	—	32	3
Droxford and Soberton ...	E. C. Pern	23	—	23	—
Bishops Waltham and Upham ...	C. P. Hemming	25	—	25	—
Hambleton	C. H. Rock	33	—	33	1
West Meon	P. M. Neighbour	16	—	16	—
Carried Forward ...		1802	116	1918	98

Name of the Vaccination District or Public Assistance Institution	Name of Medical Officer or Public Vaccinator	Number of successful Primary Vaccinations of persons			Number of successful Re-vaccinations, i.e., successful vaccinations of persons who had been successfully vaccinated at some previous time
		Under one year of age	One year and upwards	TOTAL	
	Brought Forward ...	1802	116	1918	98
Petersfield No. 1 ...	J. E. Harford ...	26	1	27	—
„ No. 2 ...	W. P. Panckridge ...	43	2	45	11
„ No. 3 ...	H. B. Corry ...	25	—	25	1
„ No. 4 ...	J. Lynn Allen ...	19	—	19	1
Romsey and Stockbridge Area.					
Andover No. 1 ...	A. B. Simmons ...	45	5	50	1
„ No. 2 ...	L. E. A. B. Farr ...	9	4	13	—
„ No. 3 ...	C. Farrant ...	3	—	3	—
„ No. 4 ...	J. A. Balck Foote ...	87	1	88	—
„ No. 5 ...	M. B. Savory ...	3	—	3	—
Romsey No. 2 ...	E. S. Rose ...	9	—	9	—
„ No. 3 ...	E. S. Rose ...	2	—	2	—
„ No. 5 ...	E. S. Rose ...	6	—	6	—
„ No. 6 ...	G. H. Johnson ...	70	6	76	3
Stockbridge No. 1 ...	M. L. Loveless ...	25	—	25	1
„ No. 2 ...	G. C. Hobbs ...	7	1	8	—
Winchester Area.					
Alresford No. 1 ...	C. E. Meryon ...	20	1	21	—
„ No. 2 ...	F. W. Jollye ...	15	1	16	—
Eastleigh No. 1 ...	P. P. Butler ...	48	1	49	—
„ No. 2 ...	A. S. Pern ...	62	1	63	1
„ No. 3 ...	R. R. Garrett ...	66	91	157	1
Hursley ...	O. G. Misquith ...	25	8	33	4
King's Worthy ...	C. J. Penny ...	15	—	15	1
Winchester ...	A. E. Bodington ...	64	2	66	1
Micheldever ...	C. Farrant ...	11	—	11	—
Twyford ...	G. Marsden Roberts ...	31	5	36	6
TOTAL	Vaccination Districts	2538	246	2784	130
PUBLIC ASSISTANCE INSTITUTIONS.					
Alresford ...	C. E. Meryon ...	—	—	—	—
Alton ...	H. Yates ...	37	—	37	1
Gosport ...	P. M. Terry ...	4	—	4	—
Andover ...	A. B. Simmons ...	—	—	—	—
Basingstoke ...	J. T. Rowe ...	2	—	2	—
Christchurch ...	N. S. Deane ...	2	—	2	—
Droxford ...	E. C. Pern ...	—	—	—	—
Fareham ...	T. Kirsopp ...	—	—	—	—
Fordingbridge ...	E. P. Vickery ...	1	—	1	—
Hartley Wintney ...	W. A. Clayton Cox ...	6	—	6	—
Havant ...	B. N. Norman ...	—	—	—	—
Kingsclere ...	J. E. Pellow ...	—	—	—	—
Lymington ...	R. M. de Mowbray ...	—	—	—	—
New Forest ...	G. Habgood ...	—	—	—	—
Petersfield ...	W. P. Panckridge ...	1	—	1	—
Ringwood ...	R. H. Little ...	—	—	—	—
Romsey ...	G. H. Johnson ...	—	—	—	—
Stockbridge ...	M. L. Loveless ...	—	—	—	—
Whitchurch ...	F. A. Coates ...	—	—	—	—
Winchester ...	P. A. T. Lowden ...	—	—	—	—
TOTAL	Public Assistance Institutions	53	—	53	1
WORKHOUSE SCHOOLS		—	—	—	—
SUMMARY.					
Vaccination Districts		2538	246	2784	130
Public Assistance Institutions		53	—	53	1
Workhouse Schools		—	—	—	—
GRAND TOTAL		2591	246	2837	131

Registration Sub-Districts comprised in the Vaccination Officer's District	Number of Births returned in the "Birth List Sheets" from 1st January to 31st December, 1934	Number of these Births duly entered by 31st January 1936, in Columns I., II., IV. and V. of the "Vaccination Register" (Birth List Sheets), viz.:				Number of these Births which on 31st January, 1936, remained unentered in the "Vaccination Register" on account (as shown by "Report Book") of			Number of these Births remaining on 31st Jan., 1936, neither duly entered in the "Vaccination Register" (columns 3, 4, 5, 6 and 7 of this Return) nor temporarily accounted for in the "Report Book" (columns 8, 9 and 10 of this Return).	Total number of Certificates and copies of Vaccination of Children under 14 received during the Calendar Year 1935	Number of Statutory Declarations of Consent actually received by the Vaccination Officer irrespective of the dates of birth of the children to which they relate, during the Calendar Year, 1935	
		Col. II.		Col. IV. Number in respect of whom Statutory Declarations of Consent have been received	Col. V. Died unvaccinated	Postponement by Medical Certificate	Removal to Districts the Vaccination Officers of which have been duly appraised	Removal to place unknown, or which cannot be reached and Cases not having been found.				
		Col. I. Successfully Vaccinated	Insusceptible of Vaccination									Had Small Pox
1	2	3	4	5	6	7	8	9	10	11	12	13
Aldershot	932	652	5	—	155	28	2	58	20	12	768	181
Alton	366	240	—	—	91	15	1	4	15	—	309	101
Alresford	102	54	—	—	43	2	1	—	2	—	53	34
Alverstoke	688	396	2	—	249	15	2	10	14	—	430	224
Andover	507	209	1	—	236	7	3	48	3	—	263	217
Basingstoke	247	67	1	—	158	10	2	6	3	—	83	186
Dummer	51	26	—	—	24	—	—	—	1	—	14	19
Bramley	54	27	2	—	24	1	—	—	—	—	32	40
Christchurch	186	58	—	—	101	6	3	2	5	11	71	109
Droxford	227	136	—	—	75	8	1	—	7	—	142	71
Eastleigh	499	254	4	—	201	13	2	3	3	19	309	240
Fareham	348	158	—	—	166	6	4	1	13	—	153	176
Fordingbridge	151	44	—	—	98	3	2	—	4	—	36	102
Hartley Wintney	164	74	—	—	53	2	2	8	1	24	58	49
Farnborough	293	122	3	—	85	6	2	—	—	75	179	85
Havant & Waterloo	271	151	1	—	104	2	—	9	4	—	194	73
Kingsclere & Whitechurch	196	67	1	—	124	2	—	1	1	—	53	110
Lymington	372	115	—	—	156	8	4	4	3	82	86	164
New Forest	403	207	—	—	142	15	1	1	18	19	214	138
Petersfield	238	152	—	—	66	11	—	1	2	6	176	86
Romsey	256	96	2	—	132	10	1	1	7	7	92	124
Stockbridge	76	33	—	—	36	1	—	—	1	5	34	35
Twyford	73	35	—	—	34	—	—	—	4	—	46	31
Winchester	457	176	—	—	215	20	—	25	15	6	148	180
	7157	3549	22	—	2768	191	33	182	146	266	3943	2775

NOTIFICATIONS OF INFECTIOUS DISEASE, 1935.
RURAL DISTRICTS.

DISTRICT	Estimated Population for Mid. 1935	CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1935.																	Total Cases		
		Small Pox	Scarlet Fever	Diphtheria (including Membranous Croup)	Enteric Fever	Pneumonia	Cholera	Plague	Puerperal Pyrexia	Puerperal Fever	Cerebro-Spinal Fever	Acute Polio-myelitis	Acute Polio- encephalitis	Encephalitis Lethargica	Dysentery	Ophthalmia Neonatorum	Erysipelas	Pulmonary Tuberculosis		Other Tuberculosis	Malaria
ALTON	21200	—	37	11	1	7	—	—	4	1	—	—	—	2	—	5	2	3	4	—	77
ANDOVER	14220	—	29	31	1	7	—	—	4	—	1	—	—	—	2	5	6	11	6	3	106
BASINGSTOKE	14320	—	38	4	—	4	—	—	2	—	—	—	1	—	8	1	2	11	2	—	73
DROXFORD	18060	—	65	1	2	16	—	—	2	—	—	—	—	—	—	2	5	5	3	—	101
HARTLEY WINTNEY	16180	—	66	18	—	4	—	—	3	—	—	—	—	—	—	—	5	5	1	—	102
KINGSCLORE AND WHITCHURCH	15130	—	85	4	—	12	—	—	—	—	—	—	—	—	—	—	7	7	5	—	120
NEW FOREST	34110	—	62	12	1	14	—	—	2	—	—	—	—	—	—	7	—	17	3	1	119
PETERSFIELD	15470	—	32	4	—	—	—	—	2	1	—	1	—	1	—	5	—	12	4	—	62
RINGWOOD AND FORDINGBRIDGE	18500	—	13	7	1	16	—	—	2	—	—	—	—	—	—	2	4	9	7	—	61
ROMSEY AND STOCKBRIDGE	18330	—	19	15	2	7	—	—	4	—	—	—	—	—	—	4	7	7	1	—	66
WINCHESTER	32080	—	80	8	—	10	—	—	5	—	—	1	—	—	—	5	6	19	8	—	142
TOTAL	217600	—	526	115	8	97	—	—	30	2	1	2	1	3	10	36	44	106	44	4	1029

NOTIFICATIONS OF INFECTIOUS DISEASE, 1935.

URBAN DISTRICTS.

DISTRICT	Estimated for Population for Mid. 1935	CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1935.																	Total Cases		
		Small Pox	Scarlet Fever	Diphtheria (including Membranaceous Croup)	Enteric Fever	Pneumonia	Cholera	Plague	Puerperal Pyrexia	Puerperal Fever	Cerebro-Spinal Fever	Acute Polio- myelitis	Acute encephalitis	Encephalitis Lethargica	Dysentery	Ophthalmia Neonatorum	Erysipelas	Pulmonary Tuberculosis		Other Tuberculosis	Malaria
ALDERSHOT	35730	—	85	40	—	9	—	—	9	1	—	—	—	—	—	5	4	23	8	—	184
ALTON	7397	—	7	23	—	8	—	—	2	—	1	—	—	—	—	4	8	2	2	—	57
ANDOVER	11490	—	2	17	1	7	—	—	9	1	—	—	—	—	—	5	3	4	5	—	54
BASINGSTOKE	14260	—	35	12	—	—	—	—	3	—	—	—	—	—	—	2	3	9	3	—	67
CHRISTCHURCH	12820	—	57	5	—	6	—	—	1	1	—	—	—	—	—	1	—	5	1	—	77
EASTLEIGH	24510	—	129	12	1	6	—	—	2	2	—	—	—	1	—	1	10	15	4	—	183
FAREHAM	24560	—	56	19	—	28	—	—	5	—	—	—	—	1	—	1	5	18	9	—	142
FARNBOROUGH	21100	—	56	10	—	4	—	—	5	1	1	—	—	—	—	1	1	23	9	—	111
FLEET	7951	—	12	2	—	4	—	—	—	—	—	—	—	—	—	—	2	6	1	—	27
GOSPORT	41910	—	248	25	—	48	—	—	3	3	1	—	—	—	—	5	19	23	3	—	378
HAVANT AND WATERLOO	23860	—	50	8	—	10	—	—	3	2	—	—	—	—	—	1	6	13	8	2	103
LYMINGTON	16880	—	11	1	—	1	—	—	—	—	—	—	—	1	—	—	—	13	3	—	30
PETERSFIELD	5836	—	30	—	1	1	—	—	—	—	—	—	—	—	—	—	2	5	2	—	41
ROMSEY	5736	—	2	9	—	2	—	—	1	—	—	—	—	—	—	—	1	2	1	—	18
WINCHESTER	24660	—	95	10	1	15	—	—	11	1	—	1	—	—	—	2	5	15	2	—	158
TOTAL URBAN	278700	—	875	193	4	149	—	—	54	12	3	1	—	3	—	28	69	176	61	2	1630
TOTAL RURAL	217600	—	526	115	8	97	—	—	30	2	1	2	1	3	10	36	44	106	44	4	1029
ADMINISTRATIVE COUNTY	496300	—	1401	308	12	246	—	—	84	14	4	3	1	6	10	64	113	282	105	6	2659

Scarlet Fever.

The number of cases notified in 1935 was less than in 1934 but still a very large number. Deaths numbered only 6 so that the disease continues to be very mild.

Diphtheria.

The incidence of this disease remains high though a slightly smaller number of cases was notified in 1935 than in the previous year. The number of deaths, however, is the highest recorded since 1929, the fatality per 1,000 notified cases being 88 as compared with 45 in the previous year and 67 in the year before. Last year it was mentioned that, so far, Hampshire had been lucky in escaping the severe type of diphtheria noted elsewhere, but some of those infected in 1935 were of this very virulent type which is rapidly fatal in non-protected persons.

Action taken with regard to Diphtheria Immunisation.

Schemes have been organised in all Urban and Rural Districts in the County except Petersfield Rural and Ringwood and Fordingbridge Rural Districts and Christchurch, Eastleigh, Gosport and Lymington Urban Districts. These vary in detail, the injections being given by either the Medical Officer of Health or by the family doctor and the treatment being limited in some cases to certain age groups. The County Council co-operates through the Health Visitors and Assistant County Medical Officers persuading parents and by giving their help where injections are carried out by the Medical Officer of Health.

These schemes and the amount of work done during the year 1935 are shown in the accompanying table which is summarised below:—

District.	Date of Commencement.	Ages dealt with.	Number who had at least two injections of T.A.F.					
			By Medical Officer of Health.			By General Practitioner.		
			1 yr.	2—5	6—14	1 yr.	2—5	6—14
Urban.								
Alton	1-1-35	1—14	16	100	97	—	2	1
Andover	29-8-35	1—14	—	62	445	—	5	5
Basingstoke	15-5-35	1—14	15	82	99	—	—	—
Farnborough	20-5-35	1— 5	—	—	—	32	183	—
Fleet	13-5-35	1 year	—	—	—	12	—	—
Havant and Waterloo	1-4-35	1— 5	26	89	1	1	9	—
Petersfield	29-7-35	1 year	—	—	—	13	—	—
Romsey	6-6-35	1—14	—	13	183	21	23	—
Rural.								
Alton	15-8-35	1— 5	—	—	—	26	74	—
Basingstoke	14-5-35	1 year	—	—	—	9	—	—
Droxford	22-7-35	1—14	—	—	—	1,150 children immunised—ages not available.		
Hartley Wintney	14-5-35	1 year	—	—	—	6	—	—
Kingsclere and Whitchurch	17-5-35	1—14	19	187	798	—	—	—
New Forest	2-9-35	1—14	—	—	—	13	99	350
Romsey and Stockbridge	19-4-35	1—14	—	42	1041	—	—	—
Winchester	4-6-35	1 year	—	—	—	22	1	—

Total Number who had received at least two injections of T.A.F. by 31.12.35.

		By M.O.H.		By G.P.	
1 year	...	76	...	155	
2—5	...	575	...	396	
6—14	...	2664	...	356	
Totals		3315	...	907	

To this total must be added 1,150 cases who were immunised in Droxford Rural District by General Practitioners. The ages of the children ranged from 1 to 14 but age grouping is not possible.

Routine immunisation of children admitted to the Council's Residential School at Lankhills, Winchester, on obtaining the parents' consent is still carried out together with immunisation of all children admitted to the Public Assistance Committee's Children's Homes.

Measles.

The past year was one of low mortality from this disease but during the present year (1936) there has been an extensive outbreak which still continues up to the time of writing. The mortality from measles shows a biennial rise and fall as in London and, no doubt, will be as high this year as in 1934.

Measles Serum.

The best method of providing a small stock of serum containing protective substances against measles for the use of practitioners has been under consideration but so far no scheme has been put into action.

Institutional Treatment of Non-Notifiable Infectious Diseases.

No special provision has been made in any area in the County for institutional treatment of cases of Measles or Whooping Cough with the exception of accommodation available at the Winchester Victoria Infectious Diseases Hospital to which cases are regularly admitted when need arises from Winchester, Basingstoke and Hartley Wintney Rural Districts. In special cases admission has been arranged in the past at Alton Joint Isolation Hospital, Andover R.D.C. Isolation Hospital, Eastleigh and Poole Isolation Hospitals. The need for provision of such accommodation has been brought to the notice of all Authorities and the matter is under consideration by several.

Cancer.

During the course of the year the Chairman of the Propaganda Committee of the British Empire Cancer Campaign visited this County. All general practitioners have been circularised by him as to their willingness to give lectures on this disease and for the purpose of local arrangements local secretaries, generally the local Medical Officers of Health, have been appointed in districts. During the current year there will be a number of lectures in various parts of the County.

The County Council has made an agreement with the Radium Centre at Southampton for the treatment of cases referred by District Medical Officers and Medical Officers of Public Assistance Institutions for which radium treatment is considered suitable. During 1935, five cases were so treated for which the County Council paid contributions.

Prevention of Blindness.

No special action has been taken under Section 66 of the Public Health Act, 1925. Prevention of Blindness is attempted by action towards abolition and treatment of ophthalmia neonatorum, constant supervision of infants and growing children at Welfare Centres and otherwise, with reference to the Ophthalmic Surgeon when required together with examination of the eyesight of school children followed by appropriate treatment.

Blind Persons Act.

The duties of the County Council under this Act have been delegated to the Hants Association for the Care of the Blind who administer the grants made by the County Council and supplement them by raising voluntary subscriptions, maintain the register and undertake educational and welfare work generally. The Association works through a Committee representing the Voluntary District Committees. The Clerk of the County Council, the County Treasurer, Education Officer and Medical Officer are ex-officio members of the Executive Committee.

During 1935, 37 cases were certified as technically blind on Form B.D.8. (or Form 37.D. for children under 16 years of age); the ages are here summarised:

Age.	M.	F.	Age.	M.	F.
0 — 5 ...	—	—	46 — 55 ...	2	4
6 — 15 ...	—	2	56 — 65 ...	5	6
16 — 45 ...	4	3	Over 65 ...	1	10

In addition the following children were certified on Forms 37.D. as partially sighted and recommended for Special School education:—

Age.	M.	F.
0 — 5 ...	—	1
6 — 15 ...	4	3

The 51 reports examined during the year may be classified as follows:—

	Blind.	Partially Sighted.	Not Blind.
Form 37.D. ...	2	8	—
Form B.D.8. ...	35	1	1
Other Reports ...	4	—	—

Of the children under 16 certified as blind or partially sighted the causes were as follows:—

Blind.

Atrophy of optic nerve following Scarlet Fever ...	1
Congenital cataract ...	1

Partially Sighted.

Congenital nystagmus ...	1
Eczematous Kerato-conjunctivitis ...	2
Eczematous Kerato-conjunctivitis, congenital cataract and nystagmus ...	1
Lens opacity, myopia and nystagmus ...	1
Myopia ...	1
Ophthalmia Neonatorum ...	1
Trachoma ...	1

Tuberculosis.

In my Report for 1934, I was able to record the lowest Death Rate from tuberculosis so far attained in this County, viz.: 0.57 per 1,000 persons. I am glad to say that a further fall has since occurred. The rate of 0.51 for 1935 is a new low record. The figure is composed of 0.41 for pulmonary tuberculosis and 0.10 for other forms of tuberculosis. The corresponding figures for England and Wales are 0.72 per 1,000, composed of pulmonary tuberculosis 0.605 and non-pulmonary tuberculosis 0.113.

The decline in the death rate from pulmonary tuberculosis in Hampshire has now been continuous for six successive years. The amount of tuberculosis in any community depends broadly on two factors: (a) the amount of infection to which it is exposed; and (b) lowered general resistance such as is produced by overwork and strain, under feeding, overcrowding, lack of air and sun, ill-health and poor physical stock. The general improvement in environment has contributed to the fall in tuberculosis; yet the preventive work of the Tuberculosis Scheme has played an important part by minimising the amount of infection.

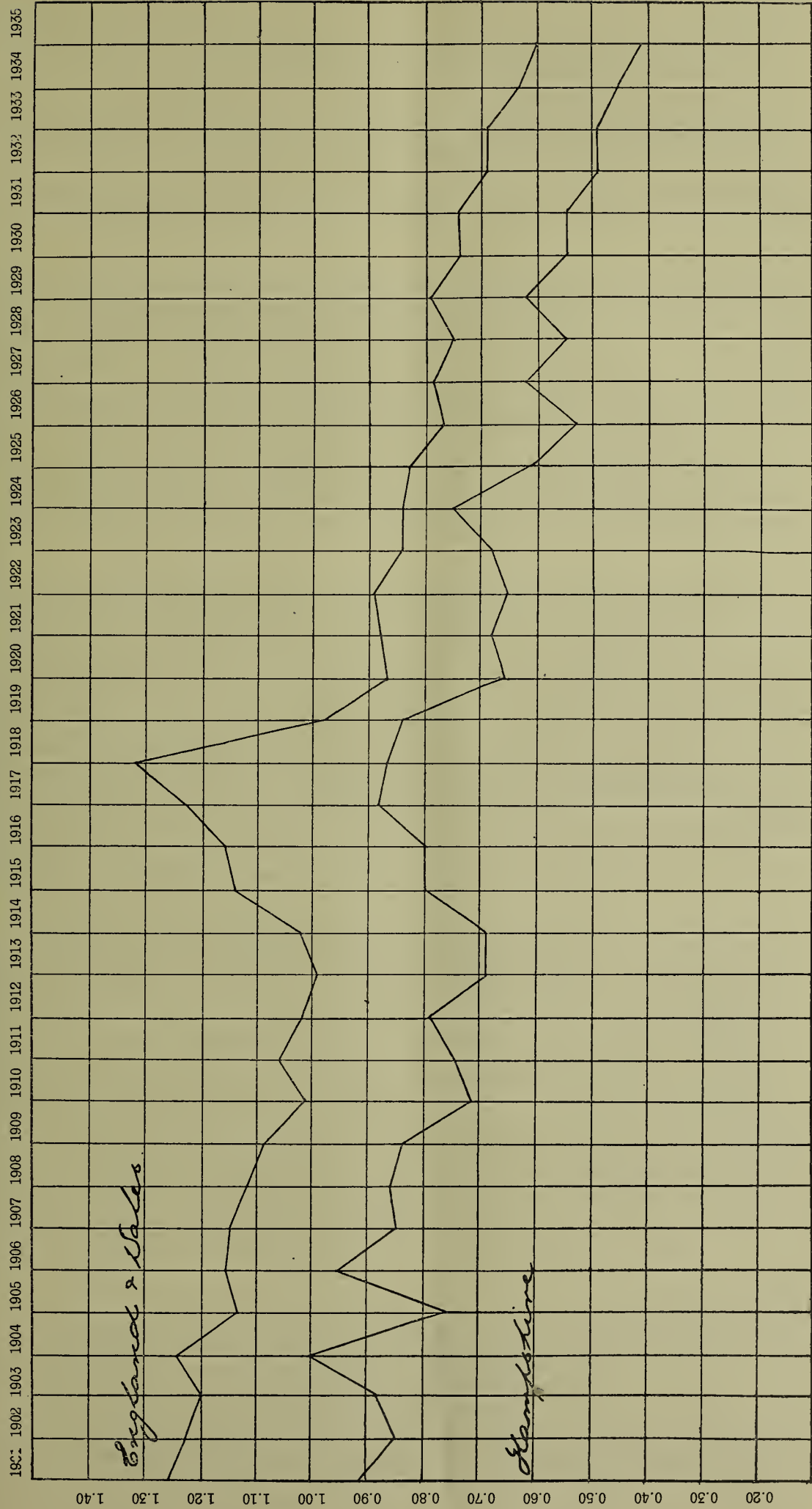
Deaths from Tuberculosis (all forms) since 1920.

Year	Urban Districts		Rural Districts		Administrative County	
	Deaths	Death Rate	Deaths	Death Rate	Deaths	Death Rate
1920	167	0.86	193	0.88	360	0.87
1921	165	0.97	177	0.81	342	0.88
1922	149	0.86	165	0.74	314	0.80
1923	172	0.99	173	0.78	345	0.87
1924	171	0.97	203	0.89	374	0.93
1925	156	0.88	158	0.69	314	0.77
1926	137	0.77	149	0.63	286	0.69
1927	160	0.88	163	0.90	323	0.78
1928	143	0.77	160	0.66	303	0.71
1929	159	0.85	175	0.72	334	0.77
1930	135	0.72	166	0.68	301	0.69
1931	150	0.78	155	0.62	305	0.69
1932	168	0.67	124	0.55	292	0.61
1933	183	0.68	122	0.57	305	0.63
1934	175	0.64	104	0.48	279	0.57
1935	163	0.58	90	0.41	253	0.51

Deaths from Pulmonary Tuberculosis since 1920.

Year	Urban Districts		Rural Districts		Administrative County	
	Deaths	Death Rate	Deaths	Death Rate	Deaths	Death Rate
1920	136	0.70	137	0.63	273	0.66
1921	131	0.77	135	0.62	266	0.68
1922	124	0.72	131	0.59	255	0.65
1923	128	0.74	141	0.63	269	0.68
1924	144	0.82	157	0.69	301	0.75
1925	125	0.70	124	0.54	249	0.61
1926	109	0.61	108	0.46	217	0.53
1927	127	0.70	130	0.55	257	0.62
1928	115	0.62	125	0.52	240	0.56
1929	125	0.66	143	0.58	268	0.62
1930	113	0.60	125	0.51	238	0.55
1931	121	0.63	121	0.49	242	0.55
1932	133	0.53	98	0.44	231	0.49
1933	138	0.51	101	0.47	239	0.49
1934	138	0.50	83	0.38	221	0.45
1935	128	0.46	76	0.35	204	0.41

Annual Death Rates from Pulmonary Tuberculosis, 1901-1935.



Notification.

The high standard of notification to which reference was made in the report for 1934 has been maintained.

During the year under review 13 deaths (5 pulmonary and 8 non-pulmonary) were reported by District Registrars of persons who had not been notified in this County in accordance with the Public Health (Tuberculosis) Regulations, but who died from tuberculosis, this condition being either the primary or a secondary cause. The number of such cases reported during 1934 was 12.

Enquiries were made as to the circumstances in which these cases remained unnotified, and it was found that of the 5 pulmonary cases 3 had received sanatorium treatment in another County and were presumably notified there. Of the other two lung cases, one was a vagrant who died suddenly in a lodging house and the other was an elderly person in comfortable circumstances. Investigation thus gave no reason to think that there had been in any instance, with the exception of the vagrant, a lack of precautionary measures.

Of the 8 non-pulmonary cases 3 were deaths following operation for abdominal tuberculosis, the diagnosis being made at the time of the operation. Two were deaths from tuberculous meningitis and one was a woman aged 84 living alone.

New Cases of Tuberculosis Notified in the Administrative County in 1935.

Age Periods		0—	1—	5—	10—	15—	20—	25—	35—	45—	55—	65—	Total (all ages)
Pulmonary, Males ...	...	—	—	—	3	18	30	50	35	31	8	5	180
„ Females ...	...	—	1	1	1	11	15	44	15	5	7	2	102
Non-Pulmonary, Males ...	...	1	9	16	8	2	7	7	2	1	—	—	53
„ Females ...	...	1	5	14	7	8	6	3	3	5	—	—	52

The total number of notified new cases of tuberculosis during 1935 was 387 as compared with 460 during the previous year.

Tuberculous Bone and Joint Disease in Children.

Numbers of new cases notified during 1932, 1933, 1934 and 1935.

Site.	School Children.				Under School Age.			
	1932.	1933.	1934.	1935.	1932.	1933.	1934.	1935.
Spine ...	2	2	1	—	1	3	1	2
Shoulder ...	1	—	—	—	—	—	—	—
Hand ...	—	—	—	—	—	1	—	1
Wrist ...	—	—	—	—	—	—	—	—
Hip ...	4	4	4	2	—	4	2	3
Knee ...	3	4	1	1	—	—	2	—
Leg ...	—	—	—	1	—	—	2	—
Foot ...	1	—	—	—	—	1	—	—
Pelvis ...	—	—	—	—	—	—	—	—
Ankle and Elbow ...	—	—	—	—	—	—	—	—
Sternum ...	—	—	—	—	1	—	—	—
Ankle ...	2	1	2	1	2	—	—	—
Totals ...	13	11	8	5	4	9	7	6

Hospital Treatment.

Number of Children	under treatment 31st December, 1934	...	26	(27)
„ „ „	admitted 1935	...	13	(15)
„ „ „	discharged 1935	...	14	(16)
„ „ „	under treatment 31st December, 1935	...	25	(26)

The figures in brackets are the corresponding returns for 1934.

Institutional Treatment.

Provision is made at The Mount Sanatorium, Bishopstoke, for 72 pulmonary male cases in the wards, with the addition of 5 beds in shelters in the grounds during the Spring and Summer months. This accommodation meets all the requirements of the County for such cases and patients are received from the London County Council when there are vacant beds.

At Chandlers Ford Sanatorium provision is made for 36 pulmonary female cases and 23 children.

The Tuberculosis Block in the Gosport Public Assistance Institution has continued to afford useful accommodation for the segregation of chronic female cases and on an average six beds have been occupied.

The treatment carried out at the sanatoria includes lung collapse by artificial pneumothorax, administration of gold salts, tuberculin and other special compounds. Major surgical operations are not done; chosen cases can be sent to special Hospitals such as Brompton Hospital for thoracoplasty and phrenic evulsion, and no difficulty in the admission of patients has been experienced. The number of such cases does not warrant the provision of a surgical unit.

Chandlers Ford Sanatorium.—At Christmas, 1934, two cases of scarlet fever occurred in the Children's Block and in spite of immediate isolation there were secondary cases. The epidemic was very difficult to control owing to the number of atypical cases such as mild sore throats without rashes. There were no severe types and all these children made excellent recoveries. It has been the experience at Chandlers Ford that when infections are introduced from without the children attacked show a high resistance and make a good recovery without complications. This may be attributed to the good open-air conditions and immediate nursing and treatment. The scarlet fever epidemic interfered with admissions of children for several weeks and the percentage of beds occupied during the year was consequently lowered. This figure was further reduced by the temporary closing of wards for interior decorations which were necessary throughout the main buildings.

A high proportion of children admitted to Chandlers Ford Sanatorium come from homes where they have been associating with a case of pulmonary tuberculosis and so exposed to infection. These children have rarely definite signs of tuberculosis in any part of the body, but frequently show disturbance of health suggestive of a primary tuberculous infection; and almost every contact has shown a marked positive reaction to the Intradermal Tuberculin test, confirming such recent infection. The occurrence of tuberculosis in families is not an hereditary liability but a result of home infection; and the most fruitful saving of life in tuberculosis work is the protection of children and young persons from infection. It is difficult to defend on any grounds the exposure of a young child to serious infection by tuberculosis, which exists in some households where there is a case of pulmonary tuberculosis, and the removal of the child from such risk would appear to be a consideration dominating all others. At present such removal frequently cannot be secured.

The Mount Sanatorium.—Dr. A. Capes was appointed Medical Officer in charge of the Sanatorium and took up residence in February, 1936. Dr. Capes was formerly Senior Assistant at Beneden Sanatorium, Kent.

During the year the building of a chapel was begun at The Mount Sanatorium, and the chapel was opened on the 25th April, 1936, when the Bishop of

Southampton dedicated the building, the Sanatorium Chaplain, the Rev. O. de Bloque assisting at the Dedication Service. The provision of the chapel was begun as a voluntary effort by the members of the Ladies House Sub-Committee and the Matron, and a considerable fund collected. Later, the Public Health Committee decided to accept responsibility for the cost of the building and the fund became available for the furnishing of the chapel.

Other Institutions.—Bone and Joint Tuberculosis in men is treated under the County Scheme at King George's Sanatorium, Liphook, whilst the women are sent to the Royal Sea-Bathing Hospital, Margate.

From the list of Institutions to which patients were sent in 1935 (given below) it will be seen that 27 beds have been occupied throughout the year by children sent to the Lord Mayor Treloar Cripples' Hospital, Alton, as compared with 29 in 1934.

Lord Mayor Treloar Cripples' Hospital, Alton:						
Non-pulmonary Tuberculosis—Children	...	...	...	...	27	(29)
King George's Sanatorium, Liphook:						
Bone and Joint Tuberculosis—Men	...	...	...	...	3	(6)
Royal Sea-Bathing Hospital, Margate:						
Bone and Joint Tuberculosis—Women	...	...	...	...	7	(7)

The figures in brackets are the corresponding figures for 1934.

Return showing the extent of Residential Treatment and Observation during the year in Institutions approved for the treatment of Tuberculosis.

		In Institu- tions on Jan. 1st	Admitted during the year	Discharged during the year	Died in the Institu- tions	In Institu- tions on Dec. 31st
Number of doubt- fully tuberculous cases admitted for observation	Adult males	1	5	3	1	2
	Adult females	—	9	7	—	2
	Children	11	34	32	—	13
	Total	12	48	42	1	17
Number of pa- tients suffering from pulmonary tuberculosis	Adult Males	45	123	106	24	38
	Adult Females	29	85	67	15	32
	Children	1	—	—	—	1
	Total	75	208	173	39	71
Number of pa- tients suffering from non-pulmon- ary tuberculosis	Adult males	9	4	8	—	5
	Adult females	14	4	15	—	3
	Children	30	34	27	2	35
	Total	53	42	50	2	43
Grand Total		140	298	265	42	131

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions approved for the treatment of Tuberculosis.

Classification on admission to the Institution	Condition at time of discharge	Duration of Residential Treatment in the Institution.												Grand Totals			
		Under 3 months, but exceeding 28 days			3—6 months			6—12 months			More than 12 months				Totals		
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		M.	F.	Ch.
Class T.B. minus	Quiescent ...	3	6	—	8	7	—	1	1	—	1	1	—	13	15	—	28
	Not quiescent ...	2	—	—	3	1	—	2	—	—	—	—	—	7	1	—	8
	Died in Institution	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1
Class T.B. plus Group I.	Quiescent ...	1	1	—	3	4	—	1	—	—	1	—	—	6	5	—	11
	Not quiescent ...	8	—	—	6	—	—	1	2	—	—	—	—	15	2	—	17
	Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Class T.B. plus Group II.	Quiescent ...	—	2	—	4	2	—	3	1	—	1	—	—	8	5	—	13
	Not quiescent ...	9	7	—	17	5	—	6	4	—	4	—	—	36	16	—	52
	Died in Institution	6	1	—	2	—	—	—	1	—	—	—	—	8	2	—	10
Class T.B. plus Group III	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Not quiescent ...	4	3	—	4	9	—	2	3	—	—	1	—	10	16	—	26
	Died in Institution	4	4	—	—	5	—	4	1	—	1	2	—	9	12	—	21
Totals (pulmonary) ...		37	24	—	48	33	—	20	13	—	8	4	—	113	74	—	187
Bones and Joints	Quiescent ...	—	—	—	—	*2	1	—	3	3	3	5	8	3	10	12	25
	Not quiescent ...	—	—	—	—	2	—	—	1	—	1	—	—	1	3	—	4
	Died in Institution	—	—	—	—	—	—	—	—	1	—	—	1	—	—	2	2
Abdom- inal	Quiescent ...	1	—	2	1	—	1	—	—	—	—	—	—	2	—	3	5
	Not quiescent ...	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1
	Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Organs	Quiescent ...	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1
	Not quiescent ...	1	—	—	—	—	1	—	—	—	—	—	—	1	—	1	2
	Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Peri- pheral glands	Quiescent ...	—	—	1	—	—	5	1	1	2	—	—	1	1	1	9	11
	Not quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals (non-pulmonary)		2	—	3	1	4	9	1	6	6	4	5	10	8	15	28	51

* Includes one case admitted as tuberculous but diagnosis not confirmed.

For the purpose of the Annual Returns submitted to the Ministry of Health cases of pulmonary tuberculosis are divided into two groups, T.B. minus-cases, in which tubercle bacilli have never been demonstrated in the sputum, and T.B. plus-cases, in which tubercle bacilli have at any time been found. T.B. plus cases are further sub-divided into three groups as follows:—

GROUP 1. Cases with slight constitutional disturbance, if any; e.g., there should not be marked acceleration of pulse nor elevation of temperature except of very transient duration; gastro-intestinal disturbance or emaciation, if present, should not be excessive. The obvious physical signs should be of very limited extent as follows: Either present in one lobe only and, in the case of an apical lesion of one upper lobe, not extending below the second rib in front or not exceeding an equivalent area in any one lobe; or where these physical

signs are present in more than one lobe, they should be limited to the apices of the upper lobes, and should not extend below the clavicle and the spine of the scapula. No complication (tuberculous or other) of prognostic gravity should be present. A small area of dry pleurisy should not exclude a case from this group.

GROUP 3. Cases with profound systemic disturbance or constitutional deterioration, with marked impairment of function, either local or general, and with little or no prospect of recovery. All cases with grave complications (e.g., diabetes, tuberculosis of intestine, etc.), whether those complications are tuberculous or not, should be classified in this group.

GROUP 2. All cases which cannot be placed in Groups 1 and 3.

As will be seen from the foregoing figures, the majority of the cases fall within Group 2, and the preponderance of this Group is a feature not only in this County but in the Country generally. When a case of pulmonary tuberculosis is diagnosed the disease has all too often advanced to a stage at which cure cannot reasonably be anticipated. This is due sometimes to the patient's neglect in getting advice; occasionally to the Medical Practitioner not suspecting tuberculosis for a time; but the vital factor seems to be that the onset of tuberculosis is typically insidious and painless, so that lesions can progress far with but few symptoms, and these are reasonably attributed at first to some general cause. Nevertheless earlier diagnosis has gained ground and efforts to advance this further are being prosecuted continuously. The family doctor, as the person who first sees the patient, has perhaps the greatest influence in this matter, and I wish to record the close co-operation of the General Practitioner with the Tuberculosis Scheme.

In a previous report I referred to cases of pleurisy with effusion, almost always tuberculous in origin, where the patient makes a temporary recovery and returns to work to develop active lung tuberculosis about three years later. Such cases still occur from time to time, and there is reason to think that had reference to the Tuberculosis Department been made at the time of the pleurisy a spell of sanatorium treatment then might have permanently arrested the disease.

It is satisfactory to record that during the past year the percentage of cases in the Groups T.B. minus and T.B. plus Group 1 has increased with a corresponding reduction in the percentage of the more advanced cases in Groups 2 and 3.

Dispensary Work, 1929-1935.—Total Attendances at all Dispensaries.

YEAR	QUARTER ENDED				TOTAL		GRAND TOTAL
	31st March	30th June	30th Sept.	31st Dec.	Insured	Uninsured	
1929	958	971	906	835	1620	2050	3670
1930	929	890	837	775	1590	1841	3431
1931	936	900	869	851	1510	2046	3556
1932	829	830	745	797	1449	1752	3201
1933	873	910	743	635	1310	1751	3061
1934	815	842	655	731	1308	1735	3043
1935	775	758	672	671	1297	1579	2876

Dispensary Work—Total Attendances at each Dispensary.

	1929		1930		1931		1932		1933		1934		1935	
	Insured	Un-insured	Insured	Un-insured	Insured	Un-insured	Insured	Un-insured	Insured	Un-insured	Insured	Un-insured	Insured	Un-insured
Andover ...	296	210	263	183	303	235	284	240	241	196	269	197	219	162
Aldershot ...	332	243	394	295	317	323	345	354	378	425	302	418	262	387
Basingstoke	169	222	158	160	134	210	153	190	103	178	126	185	125	112
Brockenhurst	133	287	114	218	90	164	68	84	—	—	—	—	—	—
Christchurch	—	—	—	—	—	—	—	—	56	69	73	80	87	97
Eastleigh ...	163	241	166	272	196	234	195	196	142	177	120	146	150	160
Fording- bridge ...	66	61	49	92	47	101	28	37	18	49	24	46	12	37
Gosport ...	200	421	242	352	232	433	173	329	184	303	228	310	166	282
Havant ...	66	68	60	51	70	77	74	79	61	78	64	98	76	82
Totton ...	—	—	—	—	—	—	—	—	35	33	23	81	83	95
Winchester	195	297	144	218	121	269	129	243	92	243	79	174	117	165
Woolston ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	1620	2050	1590	1841	1510	2046	1449	1752	1310	1751	1308	1735	1297	1579

Several tables of statistics which have been compiled for the Ministry of Health are included in this report, and the following deals with dispensary work in 1935.

DIAGNOSIS	PULMONARY				NON-PULMONARY				TOTAL				GRAND TOTAL
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts) :—													
(a) Definitely tuberculous ...	133	67	2	2	8	13	26	17	141	80	28	19	268
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	16	34	17	17	84
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	30	39	34	28	131
B.—CONTACTS examined during the year :—													
(a) Definitely tuberculous ...	—	3	—	—	—	—	2	1	—	3	2	1	6
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	4	2	8	4	18
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	55	153	189	194	591
C.—CASES written off the Dispensary Register as :—													
(a) Recovered ...	20	8	2	1	4	8	18	7	24	16	20	8	68
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ...	—	—	—	—	—	—	—	—	115	236	234	239	824
D.—NUMBER OF CASES on Dispensary Register on Dec. 31st, 1935 :—													
(a) Definitely tuberculous ...	440	293	6	3	72	83	95	67	512	376	101	70	1059
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	39	59	32	30	160

1. Number of cases on Dispensary Register on January 1st 1935	1277	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	64
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	173	4. Cases written off during the year as Dead (all causes)	155
5. Number of attendances at the Dispensary (including Contacts)	2876	6. Number of Insured Persons under Domiciliary Treatment on the 31st December 1935	80
7. Number of consultations with medical practitioners :— (a) Personal (b) Other	114 851	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ...	796
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	4045	10. Number of :— (a) Specimens of sputum, etc., examined (b) X-Ray examinations made in connexion with Dispensary work	579 120
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above	10	12. Number of "T.B. plus" cases on Dispensary Register on December 31st 1935	497

Arrangement of Tuberculosis Work—Dispensaries.

During 1935 it has been possible to extend the arrangements whereby Tuberculosis Officers devote almost the whole of their time to tuberculosis work, and the value of this method is already shown in the large increase in the number of visits to the homes of tuberculous patients, 796 as compared with 508 in 1934, an increase of more than 50 per cent.

Visits to homes by Tuberculosis Health Visitors have also shown a considerable increase and the close attention now given to the supervision of precautionary measures in homes where there is an infectious case is regarded as one of the most important aspects of the work.

Below are addresses of the County Dispensaries with days and times of attendance :—

ALDERSHOT: Manor Park House	Tuesdays and Saturdays at 10.
ANDOVER: County Council Health Centre, Junction Road	Thursdays at 10.
BASINGSTOKE: County Council Health Centre, Garth House, Castons Road	Wednesdays at 10.
CHRISTCHURCH: County Council Health Centre, Millham Street	Second and fourth Thursdays in each month at 9.30.
EASTLEIGH: County Council Health Centre, Chamberlayne Road	Tuesdays at 10.
FORDINGBRIDGE: The Welfare Centre, Shaftesbury Street	First Wednesday in each month at 10.30.
GOSPORT: 4, Clarence Square	Mondays and Thursdays at 10.
HAVANT: County Council Health Centre, Park Way	First, third and fourth Saturdays in each month at 10.
TOTTEN: County Council Health Centre, Rumbridge Street	First and third Thursdays in each month at 9.30.
WINCHESTER: County Medical Department, Trafalgar Street	Fridays at 10.

The arrangement whereby Sir Henry Gauvain acts as consultant in non-pulmonary cases has been continued during 1935. Patients are seen at Alton, at the nearest Orthopædic Clinic, or at home. During 1935 the number of patients examined under this arrangement was 114 as compared with 100 in 1934.

Dental Treatment.—The arrangement whereby the services of the Dental Officers of the Education Committee are utilised for the treatment of necessitous tuberculous patients who are ineligible for treatment under the National Health Insurance Scheme has been continued. During the year 1935, 12 such cases were treated, compared with 15 in 1934. 49 extractions and 2 other operations were necessary. In 6 instances a general anæsthetic was given. Dentures were supplied to 4 patients and in 2 other cases dentures previously supplied were repaired.

Care Work.—Patients with positive sputum are visited in their homes monthly or bi-monthly by the Tuberculosis Health Visitors, according to the requirements of the case and the condition of the home. Parents are persuaded, if possible, to send children away to relatives to prevent their exposure to infection, and advice is given on details of home hygiene which affect the safety of those in contact with the infectious person. Most patients are willing to do what is indicated and assistance is given by the loan of open-air shelters, of which there are 55 now in use. Bedsteads and bedding are also lent where this provision will enable a patient to occupy a separate room. If the home conditions are such that neither the provision of a shelter nor the supply of bed and bedding will meet the needs of the case admission to sanatorium can always be arranged for segregation. There is thus no reason why an infectious tuberculous patient need live under conditions which constitute a danger to other members of the community.

Extra Nourishment.—The practice of supplying additional nourishment in the form of milk has been continued during the year. There is an income scale which is applied before a patient can qualify; yet the assistance given on the recommendation of the Tuberculosis Officer is intended primarily as a form of treatment and not as relief. The ideal case is the patient who has resumed work on discharge from sanatorium and needs extra nourishment to enable him to maintain working capacity. In certain other cases it is found that the grant of extra milk facilitates the supervision of precautionary measures in the home. The expenditure during the financial year 1935/36 was £329.

General.—A review of the pulmonary cases on the Dispensary Register during the year showed that a total of 291 persons (187 men and 104 women) had positive sputum at that time or had recently produced infective sputum. Of the pulmonary cases formally notified under the Public Health (Tuberculosis) Regulations, 1930, 86 per cent. were referred for examination and treatment under the County Tuberculosis Scheme. Of the remainder less than half had positive sputum and the majority were persons with ample means who were able to enter private sanatoria, and a number were doubtfully tuberculous. An offer to examine contacts was made in these cases in common with patients referred for treatment by this Department, and the services of the Health Visitor to give advice on home hygiene were made available.

It will thus be seen that there are very few cases of tuberculosis in the County not under the supervision of the tuberculosis staff. An analysis of the 291 cases with positive sputum referred to above showed that 75 (25 per cent.) were segregated in institutions, 17 were occupying shelters at their own homes, 164 were occupying a separate bedroom at home, whilst 35 were sharing a bedroom. These 35 patients had a separate bed with the exception of two or three persons un-

willing to co-operate. In these cases the risks were made perfectly clear to those concerned. The number actually confined to bed at home was 11 men and 14 women.

Of the total of 291 infectious cases under supervision, 191 (65 per cent.) were ambulatory patients not in institutions. These figures show that there were 215 homes in which an infectious person was living. In one instance there were two such patients in one house.

The number of children under the age of 15 in these 215 homes was 213, of whom about 30 were removed to sanatorium as contacts or sent to relatives.

Investigation was made of the financial circumstances of the households in which there was a case of pulmonary tuberculosis with positive sputum, and the broad position is given in the following figures.

In receipt of Public Assistance (includes three in sanatorium)	32
Working. Men	27
Women	25
Number of patients who have dependants	125
Number of patients in receipt of milk allowances	29
Number of patients in receipt of Service pensions	45
Number of men having no dependants	62

One may notice the large number of patients in receipt of pensions from the Army or Navy. This arises from the presence of military and naval centres in the County, particularly from naval and military hospitals from which men are discharged from the Services and referred to the County Tuberculosis Scheme. The rate of contribution of the Army and Navy toward the incidence of tuberculosis has been mentioned in previous reports.

In view of the fact that 125 (43 per cent.) of the total number of patients were the "bread winners" of the household, it is perhaps surprising to find that only 32 of the total of 291 were in receipt of public assistance. The enquiries showed that often the contributions of other members of the household made it possible to live without applying for public assistance.

X-ray Diagnosis.

The arrangements referred to in previous reports for diagnosis by X-rays have been continued throughout the year, radiologists at Bournemouth, Portsmouth, Salisbury and Winchester making these examinations for the County Council. Facilities for X-ray examination are also provided at the Lord Mayor Treloar Cripple's Hospital, Alton, and patients who attend for examination by Sir Henry Gauvain are X-rayed when necessary. During the year 165 cases were X-rayed as compared with 135 in the previous year.

These figures do not include X-ray examinations of in-patients at non-provided institutions such as the Lord Mayor Treloar Cripples' Hospital, Alton.

Bacteriological Diagnosis.

Outfits for the collection of samples of sputum are supplied to all Medical Practitioners and the samples are examined free of charge in the County Laboratory. The number of specimens of sputum examined in recent years is as follows:—

1926	...	...	...	1563
1927	...	...	...	1753
1928	...	...	...	1821
1929	...	...	...	2016
1930	...	...	...	1923
1931	...	...	...	2287
1932	...	...	...	2316
1933	...	...	...	2333
1934	...	...	...	2458
1935	...	...	...	2449

Of the total of 2,449 specimens examined in the year 1935, 851 were found to contain tubercle bacilli.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

Public Health Act, 1925 (Section 62).

No action was taken during the year 1935 under the above.

Venereal Diseases.

The arrangements for the treatment of patients suffering from venereal diseases have been slightly altered, as shown below.

The holding of a session for men in the evening at Aldershot has been a great convenience for men who are unable to attend during the working day and has proved popular. The numbers attending the morning session did not justify continuance of this.

The accompanying tabular statement shows the days and times on which the various clinics are open. As has previously been mentioned, there is no restriction with regard to the attendance of patients, no letter or ticket is required, and all comers are attended free of charge. There is no evidence that a payment of a fee is desirable.

						Medical Officer.
Aldershot: Manor Park House.						
Women	...	Wednesdays at 2.30 p.m.	...	...	...	*Hilda M. P. Hunt
Men	...	Mondays at 5 p.m.	...	...	...	*B. L. Lloyd
Boscombe: The Royal West Hants Hospital.						
Women	...	Wednesdays and Saturdays at 2 p.m.	...	...	...	R. V. Facey
Men	...	Wednesdays and Saturdays at 4 p.m.	...	...	...
Portsmouth: The Royal Portsmouth Hospital.						
Women	...	Wednesdays at 2 p.m.	...	...	...	A. M. Stuart
		Fridays at 10 a.m.				
Men	...	Tuesdays and Thursdays at 10 a.m. and 5 p.m.				
		Wednesdays at 4 p.m.				
Children	...	Mondays at 3.30 p.m.				
Reading: The Royal Berkshire Hospital.						
Women	...	Wednesdays at 5 p.m.	...	...	...	H. Le Marquand
		Saturdays at 3 p.m.				
Men	...	Wednesdays at 2 p.m.				
		Saturdays at 5 p.m.				
Salisbury: The Salisbury Infirmary.						
Women	...	Wednesdays at 6 p.m.	...	...	...	J. L. Potts
		Saturdays at 11.30 a.m.				
Men	...	Tuesdays at 11.30 a.m.				
		Fridays at 6 p.m.				
Southampton: Women at 23, East Park Terrace;						
		Men at New Clinic, Vicarage Grounds, East Park Terrace.				
Women	...	Mondays at 10 a.m.	...	...	...	D. J. Campbell
		Thursdays at 5 p.m.				
		and Fridays at 2 p.m.				
Men	...	Mondays, Tuesdays, Wednesdays and Fridays at 5 p.m.				
		Thursdays at 11 a.m.				
Winchester: The Royal Hants County Hospital.						
Women	...	Tuesdays at 2.30 p.m.	...	...	...	*W. J. Hart
Men	...	Saturdays at 2.30 p.m.				
		Occasional cases are attended at Guildford.				

* Medical Officers of the County Council.

Number of New Cases of Syphilis attending Venereal Diseases Clinics mentioned.

Clinic	Male							Female						
	1929	1930	1931	1932	1933	1934	1935	1929	1930	1931	1932	1933	1934	1935
Aldershot	16	11	6	4	5	12	12	10	5	2	2	16	10	11
Boscombe	43	49	36	64	43	52	29	24	35	31	39	35	48	28
Reading	41	57	79	49	47	54	56	20	58	46	15	39	31	31
Salisbury	22	22	14	11	30	17	5	13	11	15	3	15	7	8
Southampton	143	144	120	89	113	120	80	38	28	46	25	65	75	58
Winchester	4	8	7	1	2	5	7	2	9	4	1	4	3	3
Portsmouth	116	112	81	83	86	88	89	65	89	56	57	60	55	46
Totals	389	404	344	301	326	348	278	177	238	202	142	234	229	185

The number of new patients suffering from Syphilis has materially decreased.
Total number of cases :—

Year	Male	Female	Grand Total	Hampshire Cases only
1929	389	177	566	102
1930	404	238	642	121
1931	344	202	546	95
1932	301	142	443	68
1933	326	234	560	121
1934	348	229	577	97
1935	278	185	463	84

Treatment of Cases of Syphilis.

	1929	1930	1931	1932	1933	1934	1935
1. Total number of New Cases (all) ...	566	642	546	443	560	577	463
2. Number who ceased to attend :—							
(a) before completing treatment ...	162	367	325	312	260	249	309
(b) after completion but before final tests were made ...	69	152	64	89	78	121	92
3. Number discharged after completion of treatment and observation ...	100	161	112	98	111	127	172
4. Number transferred to other clinics or still under treatment or observation ...	706	1580	1662	1681	1832	1986	1186
Summary of Items 2 (b) and 3 above ...	169	313	176	187	189	248	264
Proportion of Item 2 (a) to Items 2 (b) and 3 ...	0.9	1.1	1.8	1.7	1.4	1.0	1.2

The last line on this table gives some idea of the proportion of cases receiving adequate treatment.

Number of New Cases of Gonorrhœa at tending the Venereal Diseases Clinics mentioned.

Clinic	Male							Female						
	1929	1930	1931	1932	1933	1934	1935	1929	1930	1931	1932	1933	1934	1935
Aldershot	12	16	12	10	6	17	16	11	10	7	13	15	8	8
Boscombe	119	154	124	131	118	154	123	44	67	51	66	71	83	69
Reading	114	105	89	97	99	114	106	46	42	58	32	41	50	77
Salisbury	32	29	29	28	32	23	13	17	11	19	9	16	10	8
Southampton	268	295	235	203	279	311	297	27	33	24	25	53	70	51
Winchester	18	11	10	5	14	11	16	2	9	4	—	1	2	3
Portsmouth	178	187	143	170	138	274	155	37	43	37	47	44	26	57
Totals	744	802	643	644	686	904	726	185	215	200	192	241	249	273

Total Number of Cases :

Year	Male	Female	Grand Total	Hampshire Cases only
1929	744	185	929	128
1930	802	215	1017	155
1931	643	200	843	122
1932	644	192	836	110
1933	686	241	927	128
1934	904	249	1153	136
1935	726	273	999	149

Treatment of Cases of Gonorrhœa.

	1929	1930	1931	1932	1933	1934	1935
1. Total number of New Cases (all) ...	929	1017	843	836	927	1153	999
2. Number ceasing to attend :—							
(a) before completing treatment ...	99	472	467	341	254	264	427
(b) after completion but before final tests made	193	232	142	128	112	114	150
3. Number discharged after completion of treatment and observation ...	334	345	340	311	371	274	453
4. Number transferred to other clinics or still under treatment or observation	501	1223	1134	1205	1486	1566	985
Summary of Items 2 (b) and 3 above	527	577	482	439	483	388	603
Proportion of Item 2 (a) to Items 2 (b) and 3	0.2	0.8	1.0	0.8	0.5	0.7	0.7

The last line in this table gives some idea of the proportion of cases receiving adequate treatment. The proportion of defaulters ceasing to attend before completing treatment is still high.

The proportion of Gonorrhœa to Syphilis is shown in the following tables; there is no evidence apart from this that there is a large amount of Gonorrhœa evidently untreated.

Proportion of Gonorrhœa to Syphilis (all cases).

Male				1929	1930	1931	1932	1933	1934	1935
Syphilis	...	...	...	389	404	344	301	326	348	278
Gonorrhœa	...	...	...	744	802	643	644	668	904	726
				1.9	1.9	1.8	2.1	2.0	2.9	3.0
Female										
Syphilis	...	...	...	177	238	202	142	234	229	185
Gonorrhœa	...	...	...	185	215	200	192	241	249	273
				1.0	0.9	1.0	1.4	1.0	1.0	1.5
Hampshire Cases (M. and F.)										
Syphilis	...	...	...	102	121	95	68	121	97	84
Gonorrhœa	...	...	...	128	155	122	110	128	136	149
				1.2	1.2	1.3	1.6	1.0	1.4	1.8

The proportion of patients attending the venereal diseases clinics found to be infected remains constant at approximately two-thirds in the case of males and one-half in the case of females.

Male	1929	1930	1931	1932	1933	1934	1935
All new Venereal Disease Cases	1133	1206	987	945	1012	1252	1004
Non-Venereal Disease Cases ...	432	401	415	417	432	530	538
Total	1565	1607	1402	1362	1444	1782	1542
Proportion of total to Non-Venereal Disease ...	3.9	4.0	3.3	3.3	3.3	3.3	2.8
Female							
All new Venereal Disease Cases	362	453	402	334	475	478	458
Non-Venereal Disease Cases	352	375	384	358	309	342	311
Total	714	828	786	692	784	820	769
Proportion of total to Non-Venereal Disease ...	2.0	2.2	2.0	1.9	2.5	2.4	2.4

In-Patient Treatment.

In-patient treatment when required is provided at the Borough Hospital, Southampton, the London Lock Hospital and the Salisbury General Infirmary. During the year 1935, three men and two women were treated at the Borough Hospital, Southampton, and two women were treated at the General Infirmary at Salisbury, at a total cost of £52 7s. 11d. No cases were sent to the London Lock Hospital during the year.

The County Laboratory undertakes the examination of specimens for Wassermann reaction. During the year, 2,903 such specimens were submitted from all sources; 1,430 from the County Venereal Diseases Clinics and the remainder as shown in the table:—

Syphilis 1935.

Wassermann Reaction		Specimens sent in by General Practitioners and Medical Officers of Hospitals						
No. of Samples submitted	From whom	County or County Borough in which patients reside					Result of Test	
		Hampshire	Bournemouth	Dorset	Surrey	Southampton	Positive	Negative
692	Private Practitioner	377	212	98	3	2	114	578
645	Hospital	198	254	193	—	—	73	572
60	Dorset Mental Hospital ...	—	—	60	—	—	22	38
76	Hampshire Mental Hospital ...	76	—	—	—	—	28	48
Totals 1473		651	466	351	3	2	237	1236

There is little demand by private practitioners for the supply of arseno-benzene compounds; during the year 1935, only five such applications were made.

County Laboratories.

As the laboratories were established as an agency for assisting in the prevention of infectious disease, it will be understood that a very large proportion of the work is carried out without charge, but there are certain services for which a charge is made and the scale is as follows:—

WATER—Chemical Analysis	...	...	...	...	10s. 6d. per sample.
Bacteriological Examination	...	...	...	...	10s. 6d. „ „
Complete Examination	...	...	...	...	17s. 6d. „ „
Bacteriological — Advisory Samples for					
County Agricultural Organiser	...	...	...	...	1s. 9d. „ „
Hardness only	...	...	...	...	5s. 0d. „ „
SEWAGE—Chemical Analysis	...	...	...	...	7s. 6d. „ „
Chemical and Bacteriological	...	...	...	...	15s. 0d. „ „
TAR—Chemical Analysis	...	...	...	...	£1 1s. 0d. „ „
MILK—Chemical Analysis (by Gerber test and Lactometer)					
for C.A.O.	...	...	...	...	8d. „ „
for Others	...	...	...	...	1s. 0d. „ „
Estimation of Butter Fat only					
for C.A.O. and Milk Recording Society	...	...	...	...	3d. „ „
for Others	...	...	...	...	6d. „ „
Bacteriological Count	...	...	...	...	1s. 9d. „ „
Examination for Tubercle Bacilli	...	...	...	...	(a) Microscopical 1s. 9d.
					(b) Biological 5s. 0d.
for Streptococci	...	...	...	...	Microscopical 1s. 9d.
AUTOGENOUS VACCINES—					
Simple	...	...	...	...	£1 1s. 0d.
Compound	...	...	...	...	£2 2s. 0d.
Special rate for insured persons	...	...	...	...	£1 1s. 0d.
RINGWORM—Examination of Hairs	...	...	...	...	2s. 6d. per specimen.
DIPHTHERIA—Virulence Test	...	...	...	...	6s. 0d.

There are few comments to make on the work of the Laboratory in the past year. It will be noticed that the number of diphtheria swabs from schools is again smaller and that more examinations of tuberculosis sputa were made. The samples of milk examined biologically for tuberculosis were considerably more numerous.

Bacteriological Examinations.

Specimens				Quarter ended				Year ended 31st December, 1935			1935 TOTAL	1934 TOTAL
								RESULT				
				31st March, 1935	30th June, 1935	30th Sept., 1935	31st Dec., 1935	Positive	Negative	Doubtful Positive		
Diphtheria (Swabs) Schools	...	277	—	58	460	2	793	—	795	1624		
„ „ Other	...	1641	923	958	1763	623	4662	—	5285	4882		
Tuberculosis (Sputa)	... ..	548	657	544	611	811	1549	—	2360	2458	
Typhoid, Blood for	... ..	27	33	61	60	9	172	—	181	159	
Wassermann Reaction (Blood)	... ..	759	590	660	682	456	2078	157	2691	2212	
„ „ (C.S.F.)	...	55	68	46	43	47	165	—	212	133		
Smears for Gonococci	... ..	116	85	85	108	70	324	—	394	409	
Smears for Spirochætes	...	—	2	—	1	—	3	—	3	10		
Cerebro-Spinal Fluid	... ..	6	4	4	9	—	—	—	23	34	
„ „ (Cell counts)	...	6	4	5	9	—	—	—	24	32		
Milk for Tuberculosis (Routine)	...	2	—	1	2	—	5	—	5	30		
„ „ „ (Microscopical)	...	79	112	45	223	16	442	1	459	432		
„ „ „ (Biological Tests)	...	420	420	573	735	74	2074	—	2148	1665		
Ringworm, Schools	... ..	126	53	4	39	71	151	—	222	177	
„ Other	... ..	2	13	62	2	16	63	—	79	9	
Vaccines	... ..	33	14	21	33	—	—	—	101	94	
Pathological and other specimens	...	195	171	176	216	—	—	—	758	806		
Urine	... ..	168	153	150	184	—	—	—	655	548	
Waters for Architect	... ..	3	2	2	1	—	—	—	8	10	
Waters for Surveyor	... ..	—	—	—	—	—	—	—	—	3	
Waters for Schools	... ..	43	20	7	26	—	—	—	96	78	
Other Waters	... ..	92	64	92	70	—	—	—	318	501	
Waters for C.M.O.	... ..	2	1	—	—	—	—	—	3	13	
TOTAL	... ..	4600	3389	3554	5277	—	—	—	16820	16319	

Chemical Analyses, etc.

Specimens	Quarter ended				Year ended 31st Dec., 1935	Year ended 31st Dec., 1934
	31st March, 1935	30th June, 1935	30th Sept., 1935	31st Dec., 1935		
Waters for Architect	3	2	2	1	8	12
Waters for Surveyor	—	—	—	—	—	3
Waters for Schools	43	20	7	26	96	79
Other Waters	75	73	92	67	307	450
Waters for C.M.O.	2	2	—	—	4	13
Milk (Chemical)	13	6	4	36	59	79
Milk (Grade "A")	49	401	678	758	1886	202
Milk for Phosphatase Test	—	—	4	18	18	—
Milk for Butter Fats only (from 1st October, 1935)	—	—	—	3570	3570	—
Sewage for District Councils	10	9	3	10	32	43
Other Material	102	73	55	64	294	468
TOTAL	297	586	841	4550	6274	1349

Special Examinations.

During the year 1935, 179 medical examinations have been made in connection with the County Superannuation Scheme, and reports have been submitted to the Committees concerned.

During the same period, five medical examinations have been made in the case of workmen injured, or alleged to have been injured, in the course of their employment, and reports have been furnished.

The number of medical examinations of teachers and candidates for teaching appointments was 10.

H. LESLIE CRONK,
County Medical Officer.